FORM C/OH CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 22 CANDIDATE / MS / MRS / MR **FIRST** MI OFFICE USE ONLY **OFFICEHOLDER** Stephen NAME Date Received 470 b 2 1 P 04:56 RCVD **NICKNAME** LAST SUFFIX Lecholop Date Hand-delivered or Date Postmarked CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE **OFFICEHOLDER** PO Box 12252 MAILING Receipt# Amount **ADDRESS** Change of Address San Antonio, TX 78212 Date Processed Date Imaged CAMPAIGN MS/MRS/MR **FIRST TREASURER** NAME Diana Mrs. NICKNAME SUFFIX Treino STREET ADDRESS (NO PO BOX PLEASE); CAMPAIGN APT / SUITE #: CITY: STATE: ZIP CODE **TREASURER** 332 King William **ADDRESS** (Residence or Business) S.~ A-tonio Tx 78204 AREA CODE PHONE NUMBER EXTENSION **CAMPAIGN TREASURER** 744 20 4508 PHONE REPORT **TYPE** X 30th day before election January 15 Runoff 15th day after campaign treasurer appointment (officeholder only) 8th day before election Exceeded modified Final Report (Attach C/OH-FR) July 15 reporting limit Month Year PERIOD Month Day Year Day COVERED 01/01/2021 **THROUGH** 03/22/2021 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Other Primary Runoff 05/01/2021 χ General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) San Antonio Independent School District Trustee Place San Antonio Independent School District Trustee San Antonio District 1 Bexar Place San Antonio District 1

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 22

				Security Control					
13 C / OH NAME	Lecholop, Stephen		14 Filer ID						
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	litures made by political cor ut the candidate's or officeh tion only if they receive noti	nolder's knowledge or						
Additional Pages	COMMITTEE TYPE								
	GENERAL								
	C openie	COMMITTEE ADDRESS							
	SPECIFIC								
		COMMITTEE CAMPAIGN TREASURER NAM	Ē						
-		COMMITTEE CAMPAIGN TREASURER ADDI	RESS						
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS (OTHER T ES OF LOANS, OR CONTRIBUTIONS MADE E		\$ 0.00					
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA	NS)	\$ 35,670.00					
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 0.00					
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 11,778.94					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF TH RIOD	E LAST DAY OF THE	\$ 23,891.06					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS RTING PERIOD	AS OF THE LAST DAY	\$. 0.00					
17 AFFADAVIT									
Semantin Control of the Control of t	THERESA MEN Notary Pub STATE OF TE Notary ID# 1321 My Comm. Exp. 8	lic under Title 15, Election Coc EXAS 2100-5	s all information required to	ompanying report is be reported by me					
The state of the s	My Comme Expression	tom	e of Candidate or Officehold	ler I					
AFFIX NO	AFFIX NOTARY STAMP / SEAL ABOVE								
Sworn to and subs	cribed before me, by the s	ertify which, witness my hand and seal of office.	, this the	day day					
Signature of offi	Canadinistering	Printed name of officer administering	Title of officer	Addinistering oath					
Forms provided by Te	exas Ethics Commission	n www.ethics.state.tx.us		Version V1.1,eeb5f84f					

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

		00	3 of 22	2
18 FILER NAM Lecholop,	NAC STATE OF THE S	19 Filer ID		
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT	
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 35,670	.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 11,778	3.94
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$	
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	0.15

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/7 Rpt: 4/22 3 Filer ID FILER NAME Lecholop, Stephen 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$200.00 03/03/2021 Amatangelo, Gina 6 Contributor address; City; State; Zip Code 202 Delaware Street San Antonio, TX 78210 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$1,500.00 03/10/2021 Amini, Rex Contributor address; City; State; Zip Code 1803 Broadway San Antonio, TX 78215 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor Date \$100.00 03/01/2021 Barbour, Justin Contributor address; City; State; Zip Code 602 E Guenther San Antonio, TX 78210 Employer (See Instructions) Principal occupation / Job title (See Instructions) out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date \$50.00 03/17/2021 Boos, Jonathan Contributor address; City; State; Zip Code PO Box 495072 Garland, TX 75049 Employer (See Instructions) Principal occupation / Job title (See Instructions) out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date \$1,000.00 03/15/2021 Brown and Ortiz Contributor address; City; State; Zip Code 112 E Pecan San Antonio, TX 78205 Employer (See Instructions) Principal occupation / Job title (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/7 Rpt: 5/22 3 Filer ID FILER NAME Lecholop, Stephen 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$2,000.00 03/19/2021 Brozovich, John 6 Contributor address; City; State; Zip Code 333 Paseo Encinal Street San Antonio, TX 78212 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$2,000.00 03/01/2021 Charles Butt Public Education PAC Contributor address; City; State; Zip Code PO Box 6033 San Antonio, TX 78209 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$100.00 03/05/2021 Clifton, Jacob Contributor address; City; State; Zip Code 119 Belles Fleurs Circle Little Rock, AR 72223 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$500.00 03/07/2021 Cross, Ed Contributor address; City; State; Zip Code 2 Laurel Pl San Antonio, TX 78209 Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$1,000.00 03/22/2021 Dawson, Samuel Contributor address; City; State; Zip Code 129 Turnberry Way San Antonio, TX 78230 Employer (See Instructions) Principal occupation / Job title (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/7 Rpt: 6/22 3 Filer ID FILER NAME Lecholop, Stephen 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$1,000.00 03/22/2021 Dawson Jr, Eugene 6 Contributor address; City; State; Zip Code 10 Tilbury Lane San Antonio, TX 78230 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID# Date \$10,000.00 02/09/2021 **Educational Equity PAC** Contributor address; City; State; Zip Code 6312 Seven Corners Center Falls Church, VA 22044 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$1,000.00 03/10/2021 Elmendorf, Annie Contributor address; City; State; Zip Code 422 King William Street San Antonio, TX 78204 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$50.00 03/15/2021 Emmett, Marita Contributor address; City; State; Zip Code 303 Adams St San Antonio, TX 78210 Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$1,000.00 02/18/2021 Escamilla, Pablo Contributor address; City; State; Zip Code 1301 Richmond Avenue Houston, TX 77006 Employer (See Instructions) Principal occupation / Job title (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/7 Rpt: 7/22 3 Filer ID 2 FILER NAME Lecholop, Stephen 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$100.00 03/22/2021 Garcia, Nick 6 Contributor address; City; State; Zip Code 602 Mission St San Antonio, TX 78210 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$1,500.00 03/18/2021 Hayes, John Contributor address; City; State; Zip Code 138 E Hollywood Ave San Antonio, TX 78212 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$1,000.00 03/15/2021 Joeris, Gary Contributor address; City; State; Zip Code 823 Arion Pkwy San Antonio, TX 78216 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,000.00 02/10/2021 Leadership for Educational Equity Contributor address; City; State; Zip Code 1805 7th St. N.W. Washington, DC 20001 Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: Date \$5,000.00 03/03/2021 Leadership for Educational Equity Contributor address; City; State; Zip Code 1805 7th St. N.W. Washington, DC 20001 Employer (See Instructions) Principal occupation / Job title (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/7 Rpt: 8/22 3 Filer ID 2 FILER NAME Lecholop, Stephen 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$1,000.00 Linebarger Goggan Blair & Sampson, LLP 03/05/2021 6 Contributor address; City; State; Zip Code PO Box 17428 Austin, TX 78760 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$100.00 02/28/2021 Lozano, Robert Contributor address; City; State; Zip Code 128 Adams St. San Antonio, TX 78210 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$250.00 03/19/2021 Mendez, Larry Contributor address; City; State; Zip Code 204 Fawn Dr San Antonio, TX 78231 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$250.00 03/16/2021 Moll, William Contributor address; City; State; Zip Code 433 College Boulevard San Antonio, TX 78209 Employer (See Instructions) Principal occupation / Job title (See Instructions) out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date \$100.00 03/22/2021 Monroy, Rodrigo Contributor address; City; State; Zip Code 300 Labor Street San Antonio, TX 78210 Employer (See Instructions) Principal occupation / Job title (See Instructions) Forms provided by Texas Ethics Commission

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/7 Rpt: 9/22 3 Filer ID FILER NAME Lecholop, Stephen 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$250.00 03/13/2021 Morton, Russell 6 Contributor address; City; State; Zip Code 61 Parker Road Wellesley, MA 02482 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$100.00 02/27/2021 Mueschke, Nicholas Contributor address; City; State; Zip Code 114 Leopold St San Antonio, TX 78210 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$1,000.00 02/13/2021 Poneck, Douglas Contributor address; City; State; Zip Code 127 West Woodlawn Avenue San Antonio, TX 78212 Employer (See Instructions) Principal occupation / Job title (See Instructions) out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date \$20.00 03/03/2021 Raquet, Robin Contributor address; City; State; Zip Code Wickes St San Antonio, TX 78210 Employer (See Instructions) Principal occupation / Job title (See Instructions) out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date \$200.00 03/19/2021 Rico, Victoria Contributor address; City; State; Zip Code 127 East Ridgewood Court San Antonio, TX 78212 Employer (See Instructions) Principal occupation / Job title (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/7 Rpt: 10/22 3 Filer ID 2 FILER NAME Lecholop, Stephen 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$100.00 02/18/2021 Shannon, Manuela Contributor address; City; State; Zip Code P.O. Box 120041 San Antonio, TX 78212 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$1,000.00 03/18/2021 Shown, William Contributor address; City; State; Zip Code 212 Madison San Antonio, TX 78204 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor Date \$100.00 03/13/2021 Van Eman, Murray Contributor address; City; State; Zip Code 1118 Grey Oak Drive San Antonio, TX 78213 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$1,000.00 03/13/2021 Walesa, Jim Contributor address; City; State; Zip Code Park Ridge, IL Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$100.00 02/12/2021 Weber, Matthew Contributor address; City; State; Zip Code 7526 Carriage Pass San Antonio, TX 78249 Employer (See Instructions) Principal occupation / Job title (See Instructions)

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 1/11 Rpt: 11/22	Lecholop, Stephen
4 Date	5 Payee name
03/11/2021	AMAZON
6 Amount (\$) \$21.63	7 Payee address; City; State; Zip Code
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVEN DITUE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/10/2021	AMAZON
Amount (\$)	Payee address; City; State; Zip Code
\$7.52	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/15/2021	ANEDOT
Amount (\$)	Payee address; City; State; Zip Code
\$511.20	
ф011.20	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
LAI LIDITORE	Check if Austin, TX, officeholder living expense
	Payment Processing
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 2/11 Rpt: 12/22	Lecholop, Stephen
4	Date	5 Payee name
	03/08/2021	BAKERY LORRAINE
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$16.02	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Fundraising Meeting
		Tundraising Meeting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	Carrana transfer frame
	Date	Payee name
	03/09/2021	BIG FROG CUSTOM T-SHIRTS
	Amount (\$)	Payee address; City; State; Zip Code
	\$463.04	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		T-shirts
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
L	03/15/2021	Baumgarten, Jonah
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	2750 Holly Hall St
		Houston, TX 77054
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Management
		Sampaign management
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-		

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Candidate/Officeholder/Political Committee
Credit Card Payment

The Instruction Guide explains how to complete this form.

Total pages Schedule F1:
Sch: 3/11 Rpt: 13/22

Lecholop, Stephen

The Instruction Guide explains how to complete this form.

Filer ID

Total pages Schedule F1:
Sch: 3/11 Rpt: 13/22

Lecholop, Stephen

The Instruction Guide explains how to complete this form.

Total pages Schedule F1:
Sch: 3/11 Rpt: 13/22

Lecholop, Stephen

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The Instruction Guide explains how to complete this form.

The Instruction Guide explains how to complete this form.

The Instruction Guide explains how to complete this form.

03/17/2021	CAMPAIGN SERVICES LLC
6 Amount (\$) \$1,250.00	7 Payee address; City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Consulting
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held OH
Date 03/16/2021	Payee name CASCABEL MEXICAN PATIO
Amount (\$) \$35.22	Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraising Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/0	Candidate/Officeholder name Office sought Office held OH
Date 03/01/2021	Payee name CASCABEL MEXICAN PATIO
Amount (\$) \$24.89	Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraising Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate/Officeholder name Office sought Office held OH

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By Good/Beverage
Contributions/ Donations Made By Good/Beverage
Girt/Awards/Mer
Legal Services

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
1	Sch: 4/11 Rpt: 14/22	Lecholop, Stephen
_		
4	Date	5 Payee name
	03/05/2021	CRAIGSLIST.ORG
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.00	
	1.	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Hiring
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9	expenditure to benefit C/Ol	Outlindict Officeriol and That is a second of the second o
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	Date	Payee name
	03/17/2021	CSG INC.
	Amount (\$)	Payee address; City; State; Zip Code
	\$885.00	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Consulting Expense Consulting Expense
	LAFENDITORE	Campaign Consulting
		Campaign Consuming
L	O L L ONI V if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Odificial Company of the Company of
L		
	Date	Payee name
	02/09/2021	FROST BANK
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense Wire Fee
		VVIIIE FEE
L		Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	Cardidate/Officerolae/ flame
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Git/Awards/Memorials Expense Legal Services The Instruction Guide explains how to complete this form.						ut of District (enter a category not liste	d above)	
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1	Total pages Schedule F1:	2						ľ	3 FIICITE	,	
	Sch: 5/11 Rpt: 15/22		Lecholop, S	stepnen							
4	Date	5	Payee name								
	01/11/2021		GODADDY								
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Co	de				
	\$9.17										
	li .										
L		_					(1-)				
8	PURPOSE OF	(a)		See Categories listed at the	top of this sched	dule)	(D)	Description	uteida of Tax	as. Complete Schedule T	
	EXPENDITURE		Fees			1				der living expense	
								Website		- 1	
						1					
-	OI-t- ONLY if dive et	<u>_</u>	Candidata/Of	iceholder name	Of	ffice sou	aht		Of	ffice held	
9	Complete ONLY if direct expenditure to benefit C/Oh		Januluale/Oi	icendider name	Oi	ince sou	giit		0.	ince neta	
L											
	Date		Payee name	•							
	03/12/2021		H-E-B								
Г	Amount (\$)		Payee addre	ess; City;	State;	Zip Co	de				
	\$4.19										
l											
L		L									
	PURPOSE OF	(a		See Categories listed at the		dule)	(a)	Description	utaida of Tov	rac Camploto Schadula T	
	EXPENDITURE		Office Ove	rhead/Rental Expe	ense					as. Complete Schedule T der living expense	•
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L	oxportation to portain or or										
Γ	Date	Γ	Payee name	9							
	03/17/2021		HARLAND	CLARKE							
H	Amount (\$)	T	Payee addr	ess; City;	State;	Zip Co	de				
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	PURPOSE OF	(a		See Categories listed at the		edule)	(b)	Description Chack if traval	outside of T-	xas. Complete Schedule 1	
1	EXPENDITURE	1	Office Ove	rhead/Rental Exp	ense					lder living expense	•
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1		1						Ondono			
L			o "' ' ' '	····		VC				office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/O	ficeholder name	O	Office sou	gnt		U	mice field	
L	experience to beliefe 6/6	_									
1											

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			nmittee	Gift/Award Legal Sen	erage Expense ds/Memorials Exp vices truction Guide			xpense Vages/	e /Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAMI	E						3	Filer ID	
	Sch: 6/11 Rpt: 16/22		Lecholop, S	Stephen								
4	Date	5	Payee name									
	03/19/2021		Hurd, Tanis									
6	Amount (\$)	7	Payee addre	ess: (City;	State;	Zip Co	ode				
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	φ100.00		LITTO COM									
			San Antoni	o, TX 7	8223							
8	PURPOSE	(a)			ries listed at the to	op of this sch	edule)	(b)	Description	-		
	OF				ontract Labo						de of Texas. Complete Schedule T.	
	EXPENDITURE										officeholder living expense	
									Field Outread	cn		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Of	ficeholde	er name	(Office sou	ught			Office held	
Г	Date	Γ	Payee name	;								
	02/01/2021		LEADERS	HIP FOI	R EDUCATI	IONAL E	QUITY					
_	Amount (\$)		Payee addre	ess;	City;	State	Zip Co	ode				
	\$1,000.00											
	7-1											
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	PURPOSE OF	(a			ries listed at the to	op of this sch	edule)	(a)	Description Check if travel	outei	de of Texas. Complete Schedule T.	
	EXPENDITURE	l	Consulting	Expens	se						officeholder living expense	
									Campaign Co			
H	Complete ONLY if direct	L	Candidate/Of	ficeholde	er name	(Office sou	uaht			Office held	
	expenditure to benefit C/O		ounaidate. o.					J				
-		1			1							
	Date		Payee name									
	03/01/2021	L	LOCAL CO					-				
	Amount (\$)		Payee addre	ess;	City;	State	; Zip Co	ode				
	\$8.85											
H	PURPOSE	(a	Category o	Soo Catogo	ries listed at the t	top of this sch	nedule)	(b)	Description			
	OF	ľ		_	aising Exper		icatio			outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE	l							lanear de la constant		, officeholder living expense	
		l							Fundraising	Mee	eting	
	Complete ONLY if direct		Candidate/Of	fficeholde	er name	(Office so	ught			Office held	
	expenditure to benefit C/O	Н										
T												
L				-				U. compe		-	Vorsion V1.1	oobEf04

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Credit Card Payment Legal Services The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule F1: 2 FILER NAME Lecholop, Stephen Sch: 7/11 Rpt: 17/22 Date Payee name MLK5KRUNWALK 01/15/2021 Payee address; State; Zip Code City; 6 Amount (\$) \$104.00 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Community Event Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name Mooney, David 03/19/2021 State; Zip Code Payee address; City; Amount (\$) \$165.00 2711 Goliad Rd San Antonio, TX 78223 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Field Outreach Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Pavee name 03/11/2021 OFFICEMAX/DEPOT State; Zip Code Amount (\$) Payee address; City; \$3.24 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office Supplies Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Advertising Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	y - Gift/Awards/Memorials Expense Prin	ing Expense Travel in District ting Expense Travel Out of District unies/Wages/Contract Labor OTHER (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how	to complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID
Sch: 8/11 Rpt: 18/22	Lecholop, Stephen	
4 Date	5 Payee name	
03/16/2021	PRESTIGE PRINTING, LLC	
6 Amount (\$)	7 Payee address; City; State; Zi) Code
\$465.48		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule	(b) Description
OF EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sign Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/O		e sought Office held
Date	Payee name	
03/01/2021	PRESTIGE PRINTING, LLC	
Amount (\$)	Payee address; City; State; Zi	p Code
\$3,815.82		
PURPOSE	(a) Cotogory	(b) Description
OF	(a) Category (See Categories listed at the top of this schedule Printing Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Tilliang Expense	Check if Austin, TX, officeholder living expense Sign Printing
Complete ONLY if direct	Candidate/Officeholder name Offic	e sought Office held
expenditure to benefit C/O		
Date	Payee name	
03/22/2021	SCHNABELS HARDWARE	
Amount (\$) \$8.64	Payee address; City; State; Z	p Code
PURPOSE	(a) Category (See Categories listed at the top of this schedule	(b) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY if direct expenditure to benefit C/O		e sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Co Credit Card Payment		ı - I Coı	nmittee	Food/Beverage E Gift/Awards/Mem- Legal Services The Instructio	orials Expense	Printi Salari		se s/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)
	0.1-1.1-54	<u></u>	EILED MANA		п ошис схри	113 11011 11	, compr		12	Filer ID
	otal pages Schedule F1:	2							1	File ID
	Sch: 9/11 Rpt: 19/22		Lecholop,							
4 Da	ate	5	Payee name							
03	3/04/2021		TEXAS DE	MOCRATIC	PARTY					
6 Ar	mount (\$)	7	Payee addre	ess; City;	Sta	ate; Zip	Code			
	\$325.00									
8	PURPOSE	(a)	Category (s	See Categories liste	d at the top of this	schedule)	(b)	Description		
	OF EXPENDITURE			rhead/Rental						e of Texas. Complete Schedule T.
	EXPENDITORE							Campaign D		officeholder living expense ase
	omplete <u>ONLY</u> if direct openditure to benefit C/OI		Candidate/Of	ficeholder nam	e	Office	sought			Office held
D	ate		Payee name	9						
03	3/01/2021		THE HAVE	EN SOUTHTO	NWC					
Ai	mount (\$) \$6.77		Payee addre	ess; City;	St	ate; Zip	Code			
	PURPOSE	10	Catagoni				L	Description	-	
I	OF EXPENDITURE	(a		See Categories liste I/Fundraising		s schedule)		Check if trave	in, TX,	le of Texas. Complete Schedule T. officeholder living expense ting
	omplete <u>ONLY</u> if direct xpenditure to benefit C/O		Candidate/Of	ficeholder nam	ne	Office	sought			Office held
D	ate	Γ	Payee name	9						
0	3/15/2021		THE HOM	E DEPOT						
A	mount (\$) \$12.57		Payee addr	ess; City;	St	ate; Zip	Code			
ļ	PURPOSE OF EXPENDITURE	(a		See Categories lister erhead/Renta		s schedule)	(b)		in, TX,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct xpenditure to benefit C/O		Candidate/O	fficeholder nan	ne	Office	sought			Office held

SCHEDULE F1

Advertising Expense

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services		Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)		
	of calc out a 1 aymon		The Instruction Guide explains	how to cor	mple	te this form.		
1	Total pages Schedule F1:	2 FILER NAME	≣				3 Filer ID	
	Sch: 10/11 Rpt: 20/22	Lecholop, S	Stephen					
4	Date	5 Payee name						
	03/02/2021	TIFF'S TRE						
C	Amount (\$)	7 Payee addre	ss; City; State	; Zip Co	de			
U	\$192.14	r ayee addre	50, 5ky, 5kk	, _,p ===				
8	PURPOSE	(a) Category (S	ee Categories listed at the top of this sch	nedule)	(b)	Description		0.1.11.7
	OF EXPENDITURE	Solicitation.	/Fundraising Expense				outside of Texas. Complete , TX, officeholder living exp Expense	
					<u> </u>		000 1 11	
9	Complete ONLY if direct expenditure to benefit C/OF		iceholder name	Office sou	ght		Office held	
	Date	Payee name						
	03/09/2021	WALMART						
H	Amount (\$)	Payee addre	ess; City; State	; Zip Co	de			
	\$9.41	25.52 2 5 5		ti ti				
	·							
	PURPOSE	(a) Category (s	See Categories listed at the top of this sc	hedule)	(b)	Description		
	OF EXPENDITURE	Office Ove	rhead/Rental Expense				outside of Texas. Complete	
	LXI ENDITORE					Office Suppli	n, TX, officeholder living exp	ense
						Office Suppli	65	
					<u> </u>			
	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office sou	ıght		Office held	
Г	Date	Payee name)					
	02/25/2021	WIX						
\vdash	Amount (\$)	Payee addre	ess; City; State	e; Zip Co	ode			
	\$7.03	,	,					
-	DUDDOCT	(a) Cata		1 10 100	(h)	Description		
	PURPOSE OF	(a) Category (s	See Categories listed at the top of this so	nedule)	(")		outside of Texas. Complet	e Schedule T.
	EXPENDITURE	rees				Check if Austin	n, TX, officeholder living exp	pense
						Website		
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ught		Office held	
-								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Event Expense Loan Repayment/Reimbursement Advertising Expense Accounting/Banking Office Overhead/Rental Expense Polling Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By -Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Credit Card Payment Legal Services The Instruction Guide explains how to complete this form. FILER NAME 3 Filer ID Total pages Schedule F1: 2 Lecholop, Stephen Sch: 11/11 Rpt: 21/22 Date Payee name WIX 02/16/2021 Payee address; State; Zip Code City; 6 Amount (\$) \$149.38 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Website Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER SCHEDULE K 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 22/22 3 Filer ID 2 FILER NAME Lecholop, Stephen 8 Amount (\$) Date 5 Name of person from whom amount is received \$0.15 03/22/2021 Frost Bank 6 Address of person from whom amount is received; City; State; Zip Code TX Purpose for which amount is received Check if political contribution returned to filer **Bank Account Interest** Version V1.1.eeb5f84f

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Forms provided by Texas Ethics Commission