

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 11				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY			
	Mrs. Stephanie						
NICKNAME	LAST	SUFFIX	Date Received				
Elad							
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE		
15251 Camden Lane Frisco TX 75035							
<small>Change of Address</small>							
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			Date Hand-delivered or Date Postmarked	
(858) 735-8904							
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #		Amount \$	
	Mr. Harry						
NICKNAME	LAST	SUFFIX	Date Processed				
Komsky			Date Imaged				
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
1010 Ocean Breeze Drive Allen TX 75013							
<small>(Residence or Business)</small>							
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
(310) 377-0071							
9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)			
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
1 / 1 / 23 THROUGH 6 / 30 / 23							
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	Primary	Runoff	<input checked="" type="checkbox"/> Other Description	
	5	7	22	General	Special	MUNICIPAL	
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)			
Frisco ISD Trustee, Place 3							
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.						
	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL	COMMITTEE ADDRESS					
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRESS					
GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2
2 of 11

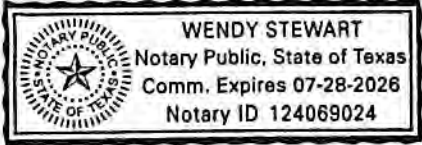
13 C / OH NAME Elad, Stephanie	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC		
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,136.88
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	537.82
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1,654.22
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	20,388.38

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



AFFIX NOTARY STAMP / SEAL ABOVE

Stephanie Elad

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Stephanie Elad, this the 12th day of July, 20 23, to certify which, witness my hand and seal of office.

Wendy Stewart

Signature of officer administering

WENDY STEWART

Printed name of officer administering

Exec. Sec.

Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Elad, Stephanie		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,136.88
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 537.82
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/7 Rpt: 4/11
2 FILER NAME Elad, Stephanie		3 Filer ID
4 Date 01/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akin, Howard	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 44 Armstrong Dr. Frisco, TX 75034		
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Montford Multifamily
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appel, Mark	Amount of Contribution (\$) \$23.00
Contributor address; City; State; Zip Code 6711 Mimms Drive Dallas, TX 75252		
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions)
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Jackie	Amount of Contribution (\$) \$23.00
Contributor address; City; State; Zip Code 10984 Star Meadow Drive Frisco, TX 75033		
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Carpenter & Associates
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biscan, Dianna	Amount of Contribution (\$) \$47.97
Contributor address; City; State; Zip Code 7714 Element Ave. Plano, TX 75024		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Born, Terry	Amount of Contribution (\$) \$23.00
Contributor address; City; State; Zip Code 7257 Reflection Bay Drive Frisco, TX 75036		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/7 Rpt: 5/11
2 FILER NAME Elad, Stephanie		3 Filer ID
4 Date 01/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooke, Scott <hr/> 6 Contributor address; City; State; Zip Code 15581 Crown Cove Lane Frisco, TX 75035	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) self employed
Date 01/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Browning, Rachel <hr/> Contributor address; City; State; Zip Code 14914 Huffman Lane Frisco, TX 75035	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) Mortgage Broker		Employer (See Instructions) self employed
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Costa, Vickie <hr/> Contributor address; City; State; Zip Code 10521 Chablis Lane Frisco, TX 75035	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) retired
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feffer-Thoman, Sherrie <hr/> Contributor address; City; State; Zip Code 8796 Bullrush Rd. Frisco, TX 75035	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) Underwriter		Employer (See Instructions) Zurich
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartoonian, Lennea <hr/> Contributor address; City; State; Zip Code 11043 Ruidosa Lane Frisco, TX 75033	Amount of Contribution (\$) \$47.97
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Hart Nissan

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/7 Rpt: 6/11
2 FILER NAME Elad, Stephanie		3 Filer ID
4 Date 01/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffman, Kerry	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 9423 Tanyard Lane Frisco, TX 75033		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchinson, Christie	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2809 Hancock Lane Celina, TX 95009		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) QCC Healthcare Consultants
Date 01/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inbody, Gayle	Amount of Contribution (\$) \$47.97
Contributor address; City; State; Zip Code 24281 Ontario Lane Lake Forest, CA 92630		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koelmel, Jean	Amount of Contribution (\$) \$23.00
Contributor address; City; State; Zip Code 213 Clearwater Court Little Elm, TX 75068		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lambert, Maurice	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code 6 Fairway Drive Frisco, TX 75034		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/7 Rpt: 7/11
2 FILER NAME Elad, Stephanie		3 Filer ID
4 Date 01/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lundquest, Whitney	7 Amount of Contribution (\$) \$23.00
6 Contributor address; City; State; Zip Code 809 Moss Cliff Circle McKinney, TX 75071		
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Frisco ISD
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCorkill, Thomas	Amount of Contribution (\$) \$23.00
Contributor address; City; State; Zip Code 5857 Legacy Drive Apt 1246 Frisco, TX 75034		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melinda, Preston	Amount of Contribution (\$) \$23.00
Contributor address; City; State; Zip Code 13370 Bayfield Drive Frisco, TX 75033		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) CCDF
Date 01/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milholland, Michelle	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 6050 Chamberlyne Dr. Frisco, TX 75034		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Kerri	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code 9209 Warm Springs Circle Plano, TX 75024		
Principal occupation / Job title (See Instructions) Designer/Contractor		Employer (See Instructions) self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/7 Rpt: 8/11
2 FILER NAME Elad, Stephanie		3 Filer ID
4 Date 01/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nedderman, Eric	7 Amount of Contribution (\$) \$23.00
6 Contributor address; City; State; Zip Code 2359 Crystal Falls Drive Frisco, TX 75036		
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Frisco ISD
Date 01/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rafael, Jimenez	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code 3194 Fayette Trail Frisco, TX 75034		
Principal occupation / Job title (See Instructions) Technical Account Manager		Employer (See Instructions) Nokia
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, Jay	Amount of Contribution (\$) \$23.00
Contributor address; City; State; Zip Code 15178 Beckley Ln. Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) self employed
Date 01/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, James & Helen	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2355 Loch Haven Drive Frisco, TX 75036		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sommers, David	Amount of Contribution (\$) \$45.00
Contributor address; City; State; Zip Code 563 Chumbley Road Woodbury, TN 37190		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/7 Rpt: 9/11
2 FILER NAME Elad, Stephanie		3 Filer ID
4 Date 01/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stricklin, Thomas	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 856 Crystal Lake Drive Frisco, TX 75036		
8 Principal occupation / Job title (See Instructions) Executive Manager		9 Employer (See Instructions) Intelisite
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Charlie	Amount of Contribution (\$) \$23.00
Contributor address; City; State; Zip Code 2474 Angel Falls Drive Frisco, TX 75036		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tripodi-Peterson, Sonja	Amount of Contribution (\$) \$23.00
Contributor address; City; State; Zip Code 1556 Trevino Lane Frisco, TX 75036		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wakin, Jackie	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 5938 Indian Blanket Drive Frisco, TX 75036		
Principal occupation / Job title (See Instructions) Professional Organizer		Employer (See Instructions) self employed
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Ronald	Amount of Contribution (\$) \$23.00
Contributor address; City; State; Zip Code 5601 Arminta Avenue Frisco, TX 75034		
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/11
2 FILER NAME Elad, Stephanie		3 Filer ID
4 Date 01/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whisenant, Jaclyn <hr/> 6 Contributor address; City; State; Zip Code 15267 Nottingham Drive Frisco, TX 75035	7 Amount of Contribution (\$) \$47.97
8 Principal occupation / Job title (See Instructions) self employed		9 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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
Legal Services

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 11/11	2 FILER NAME Elad, Stephanie	3 Filer ID
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4 Date 01/25/2023	5 Payee name Constant Contact
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6 Amount (\$) \$287.82	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email service: January - June 2023
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/16/2023	Payee name Geeky Beth Marketing
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Amount (\$) \$250.00	Payee address; City; State; Zip Code 2900 Syler Drive Hutchinson, KS 67502
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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