CANDIDAT	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:			
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR	Theres a	J R	OFFICE USE ONLY			
NAME	NICKNAME	LAST	SUFFIX	Date Received			
	Tracie	Shipma		RECEIVED			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX	ADT / SHITE #	STATE; ZIP CODE	JAN 1 2 2023 3:57 PM &C. City Secretary's Office			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked			
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST	MI	Receipt # Amount \$			
NAME	NICKNAME	Drevesa	JR	Date Processed			
	Trace	Shipman	DAM DA	Date Imaged			
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS	(NO PO BOX PLEASE); APT / SU	JITE #; CITY;	STATE; ZIP CODE			
(Residence or Business)							
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
9 REPORT TYPE	January 15 July 15	30th day before elec		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month 7	Day Year / 1 / 22	THROUGH 1	Day Year / 14 / 23			
11 ELECTION	Month Day	Year Primary	Runoff Other Description Special				
12 OFFICE	OFFICE HELD (if any)	X Integral	13 OFFICE SOUGHT (If known) Frisco City Counc				
14 NOTICE FROM POLITICAL COMMITTEE(S)	CONSENT. CANDIDATES	S AND OFFICEHOLDERS ARE REQUIR	MAY HAVE BEEN MADE WITHOUT THE CAND	ADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR HEY RECEIVE NOTICE OF SUCH EXPENDITURES.			
CONTROLLY AND SERVED PAR	COMMITTEE TYPE	COMMITTEE NAME					
Additional Pages	GENERAL	COMMITTEE ADDRESS					
	SPECIFIC	COMMITTEE CAMPAIGN TREA	ASURER NAME				
		COMMITTEE CAMPAIGN TRE	ASURER ADDRESS				
GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER FORM C/OH COVER SHEET PG 2 CAMPAIGN FINANCE REPORT 15 C/OH NAME 16 Filer ID (Ethics Commission Filers) Theresa Jo Reveal Shipman 17 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN **TOTALS** \$ PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR 0 CONTRIBUTIONS MADE ELECTRONICALLY) 2. TOTAL POLITICAL CONTRIBUTIONS \$ 0 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. TOTALS \$ 7,864.58 4. TOTAL POLITICAL EXPENDITURES CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY 181.17 BALANCE OF REPORTING PERIOD OUTSTANDING TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE 6. 4,000.00 LOAN TOTALS LAST DAY OF THE REPORTING PERIOD 18 SIGNATURE 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. Please complete either option below: JUDY L GRIFFITH Notary Public, State of Texas Comm. Expires 08-29-2026 Sent Notary ID 12431792-5 pman this the 12 day of Sworn to and subscribed before me by Theresa Qo to certify which, witness my hand and seal of office. (2) Unsworn Declaration My name is _, and my date of birth is _ My address is _____ (street) (country) ____, on the _ Executed in _____ County, State of ____

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 Tł	nmissi	on Filers)					
21	SUBTOTAL AMOUNT						
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS					
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$					
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$					
4.	SCHEDULE E: LOANS	SCHEDULE E: LOANS					
5.	■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONT	\$	7,864.58				
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS					
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CO	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS					
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$				
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS					
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BU	\$					
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONT	RIBUTIONS	\$				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTION TO FILER	\$					

LOANS SCHEDULE E If the requested information is not applicable, DO NOT include this page in the report. 1 Total pages Schedule E: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Theresa Jo Reveal Shipman 4 TOTAL OF UNITEMIZED LOANS \$ 4,000.00 5 Date of loan 7 Name of lender Loan Amount (\$) out-of-state PAC (ID#:_ 07/22/2022 4,000.00 Theresa Shipman 10 Interest rate Is lender 8 Lender address; City; State: Zip Code a financial 11 Maturity date Y IN 12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) Self Employed/Owner Many Voices 14 Description of Collateral 15 Check if personal funds were deposited into political account (See Instructions) none 17 Name of guarantor 16 GUARANTOR 19 Amount Guaranteed (\$) INFORMATION 18 Guarantor address; City: State: Zip Code not applicable 20 Principal Occupation (See Instructions) 21 Employer (See Instructions) Date of loan Loan Amount (\$) Name of lender out-of-state PAC (ID#:_ Interest rate City; Is lender State; Zip Code Lender address: a financial Institution? Maturity date Principal occupation / Job title (See Instructions) Employer (See Instructions) Description of Collateral Check if personal funds were deposited into political account (See Instructions) none GUARANTOR Name of guarantor Amount Guaranteed (\$) INFORMATION Guarantor address; City; State; Zip Code not applicable

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see Instruction guide for additional reporting requirements.

Employer (See Instructions)

Principal Occupation (See Instructions)

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Printing Expense Travel Out Of District Salaries/Wages/Contract Labor Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Theresa Jo Reveal Shipman 4 Date 5 Payee name 07/12/2022 **Booker Industries** 6 Amount (\$) 7 Pavee address: City; State; Zip Code 14243 Proton Rd. Farmer's Branch TX 75224 51.66 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Printing Expense Mailers OF EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name 07/19/2022 **Booker Industries** Amount (\$) Payee address; City; State; Zip Code 14243 Proton Rd. Farmer's Branch TX 75224 2,234.86 Category (See Categories listed at the top of this schedule) Description **Printing Expense** Mailers PURPOSE OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Office sought Office held Payee name 07/22/2022 **Booker Industries** Amount (\$) Pavee address: State: Zip Code 14243 Proton Rd. Farmer's Branch TX 75224 1055.82 Category (See Categories listed at the top of this schedule) Description PURPOSE Printing Expense Mailers EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

		EXPENDITURE CATE	GORIES F	OR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense		Office Ove Polling Exp Printing Ex Salaries/W	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to how to complete this form.		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1:		AME Jo Reveal Shipman			3 Filer	ID (Ethics	Commission Filers)	
4 Date 07/31/2022	5 Payeens	_{ame} rity Bank						
6 Amount (\$) 10.00	7 Payee a 8910 Pre	^{ddress;} eston Rd, Frisco, TX 750	34	City;	;	State;	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Bank Fees (b) Desc			(b) Description				
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Aus				stin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		date / Officeholder name		Office sought		(Office held	
08/02/2022	Payee na Booker	_{ame} Industries						
Amount (\$) 4,462.24	Payee a 14243 Pr	^{ddress} ; oton Rd. Farmer's Bran	ch TX 752	City; 224	,	State;	Zip Code	
PURPOSE OF EXPENDITURE		y (See Categories listed at the top of this Expense	s schedule)	Description Mailers				
	Check if travel outside of Texas. Complete Schedule T. Check if Austin,					n, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF		late / Officeholder name		Office sought		C	Office held	
Date 08/31/2022	Payee n	_{ame} rity Bank						
Amount (\$) 10.00	Payee a 8910 Pro	^{ddress;} eston Rd, Frisco, TX	75034	City;	;	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category Bank Fe	/ (See Categories listed at the top of this	s schedule)	Description				
		Check if travel outside of Texas. Complete	Schedule T.	Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OF		late / Officeholder name		Office sought			Office held	

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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 (and repeated to the control of the control of

Salaries/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 (Ethics Commission Filers) Theresa Jo Reveal Shipman 4 Date 5 Payee name 09/30/2022 **Prosperity Bank** 6 Amount (\$) 7 Payee address; City; State; Zip Code 8910 Preston Rd, Frisco, TX 75034 10.00 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description PURPOSE Bank Fees OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Payee name 10/31/2022 Prosperity Bank Amount (\$) Payee address; City: State: Zip Code 8910 Preston Rd, Frisco, TX 75034 10.00 Category (See Categories listed at the top of this schedule) Description Bank Fees PURPOSE OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Complete ONLY if direct Office held expenditure to benefit C/OH Payee name 11/30/2022 **Prosperity Bank** Amount (\$) Payee address; City; State; Zip Code 8910 Preston Rd, Frisco, TX 75034 10.00 Category (See Categories listed at the top of this schedule) Description PURPOSE Bank Fees **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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
Other (enter a category political above)

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 (Ethics Commission Filers) 4 Theresa Jo Reveal Shipman 4 Date 5 Payee name 12/31/2022 **Prosperity Bank** 6 Amount (\$) 7 Payee address; City; State; Zip Code 8910 Preston Rd, Frisco, TX 75034 10.00 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Bank Fees OF EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Amount (\$) City: Payee address: State: Zip Code Category (See Categories listed at the top of this schedule) Description PURPOSE OF **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Office sought Office held Payee name Date Amount (\$) Payee address; City; State; Zip Code Category (See Categories listed at the top of this schedule) Description PURPOSE Bank Fees EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED