

# 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:

29

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

Mrs

Angelia

E

NICKNAME

LAST

SUFFIX

Pelham

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

Mrs

Linda

NICKNAME

LAST

SUFFIX

Kelly

## OFFICE USE ONLY

Date Received

RECEIVED

APR 04 2024

3:28 P.M. AC  
City Secretary's Office

Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN  
TREASURER  
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

5408 Southern Hills Drive Frisco Tx 75034

(Residence or Business)

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

( 972 )

742-0007

9 REPORT TYPE

☐

January 15

☒

30th day before election

☐

Runoff

☐

15th day after campaign  
treasurer appointment  
(Officeholder Only)

☐

July 15

☐

8th day before election

☐

Exceeded Modified  
Reporting Limit

☐

Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

1

1

24

THROUGH

Month

Day

Year

3

25

24

11 ELECTION

ELECTION DATE

Month

Day

Year

5

4

24

ELECTION TYPE

☐

Primary

☐

Runoff

☐

Other  
Description

☒

General

☐

Special

12 OFFICE

OFFICE HELD (if any)

City Council, Place 3

13 OFFICE SOUGHT (if known)

City Council, Place 3

14 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

COMMITTEE TYPE

COMMITTEE NAME

☐

GENERAL

COMMITTEE ADDRESS

☐

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT****FORM C/OH  
COVER SHEET PG 2**

<b>15 C/OH NAME</b> Angelia Pelham		<b>16 Filer ID (Ethics Commission Filers)</b>
<b>17 CONTRIBUTION TOTALS</b>	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)	\$ 34,843.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 16,152.33
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 20,317.38
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**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.

Angelia Pelham  
Signature of Candidate or Officeholder

**Please complete either option below:**

**(1) Affidavit**

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Angelia Pelham this the 24<sup>th</sup> day of April, 2024, to certify which, witness my hand and seal of office.

Linda A. Jones      Linda A. Jones      Notary Public  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

**OR****(2) Unsworn Declaration**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_ (street) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip code) \_\_\_\_\_ (country).

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ (month) (year).

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)

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

<b>19 FILER NAME</b> Angelia Pelham		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 31,070.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 3,773.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 16,152.33
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	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	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 20
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers)
4 Date 03/07/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Ken Tysell 6 Contributor address; City; State; Zip Code 1213 Gladewater Dr Frisco TX 75033	7 Amount of contribution (\$)  500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/18/2024	Full name of contributor out-of-state PAC (ID#: _____) Jertonya Feemster Contributor address; City; State; Zip Code 6633 John Hickman Pkwy #1215 Frisco TX 75034	Amount of contribution (\$)  30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/25/2024	Full name of contributor out-of-state PAC (ID#: _____) Dean Stubbe Contributor address; City; State; Zip Code 4635 Pine Valley Dr Frisco TX 75034	Amount of contribution (\$)  100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/03/2024	Full name of contributor out-of-state PAC (ID#: _____) Gwen Sanders Contributor address; City; State; Zip Code 2131 Broken Bend Ln Frisco TX 75036	Amount of contribution (\$)  100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers)
4 Date 02/23/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Todd Armstrong 6 Contributor address; City; State; Zip Code 1613 Lismore Ct Keller TX 76262	7 Amount of contribution (\$) <b>1,000.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/25/2024	Full name of contributor out-of-state PAC (ID#: _____) Phillip A Rose Contributor address; City; State; Zip Code 6853 Merrilee Ln Dallas TX 75214	Amount of contribution (\$) <b>1,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/28/2024	Full name of contributor out-of-state PAC (ID#: _____) Colin Fitzgibbons Contributor address; City; State; Zip Code 6946 Southridge Dr Dallas TX 75214	Amount of contribution (\$) <b>1,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/07/2024	Full name of contributor out-of-state PAC (ID#: _____) Jeff Brawner Contributor address; City; State; Zip Code 4364 San Carlos Street Dallas TX 75205	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers)
4 Date 02/17/2024	5 Full name of contributor out-of-state PAC (ID#: Theresa & Michael Sinacola 6 Contributor address; City; State; Zip Code 6701 Glendenny Ln Plano TX 75024	7 Amount of contribution (\$) <b>1,000.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2024	Full name of contributor out-of-state PAC (ID#: Richard Reupke Contributor address; City; State; Zip Code 5107 Spanish Oaks Frisco TX 75034	Amount of contribution (\$) <b>1,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2024	Full name of contributor out-of-state PAC (ID#: Robert Shaw Contributor address; City; State; Zip Code 8343 Douglas Ave Suite 360 Dallas TX 75225	Amount of contribution (\$) <b>1,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2024	Full name of contributor out-of-state PAC (ID#: James Sinacola Contributor address; City; State; Zip Code 19 Stonebriar Way Frisco TX 75034	Amount of contribution (\$) <b>1,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers)
4 Date 03/02/2024	5 Full name of contributor out-of-state PAC (ID#: Veeraiah Perni 6 Contributor address; City; State; Zip Code 2717 Arabian Dr Hubbard OH	7 Amount of contribution (\$) <b>150.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/11/2024	Full name of contributor out-of-state PAC (ID#: Mimi Vanderstraaten Contributor address; City; State; Zip Code 4032 Druid Ln Dallas TX 75205	Amount of contribution (\$) <b>1,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/12/2024	Full name of contributor out-of-state PAC (ID#: Fehmi Karahan Contributor address; City; State; Zip Code 3831 Shenandoah St Dallas, TX 75205	Amount of contribution (\$) <b>2,500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/26/2024	Full name of contributor out-of-state PAC (ID#: Christophr Kleinert Contributor address; City; State; Zip Code 5909 Steuben CT Dallas TX 75248	Amount of contribution (\$) <b>1,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers)
4 Date 03/06/2024	5 Full name of contributor out-of-state PAC (ID#: _____) RJ Grogan 6 Contributor address; City; State; Zip Code 6331 Desco Dr Frisco TX 75225	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2024	Full name of contributor out-of-state PAC (ID#: _____) Joseph Sinacola Contributor address; City; State; Zip Code 4955 Wedgewood Dallas TX 75220	Amount of contribution (\$) <b>1,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/04/2024	Full name of contributor out-of-state PAC (ID#: _____) Jan Thorburn Contributor address; City; State; Zip Code 7902 Ruskin Cir Frisco TX 75034	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/10/2024	Full name of contributor out-of-state PAC (ID#: _____) Richard Session Contributor address; City; State; Zip Code 7951 Collin Mckinney Pkwy McKinney TX 75070	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers)
4 Date 01/10/2024	5 Full name of contributor out-of-state PAC (ID#: Stacey Price 6 Contributor address; City; State; Zip Code 12550 Ducks Landing Frisco TX 75033	7 Amount of contribution (\$) <b>200.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/10/2024	Full name of contributor out-of-state PAC (ID#: Bill Nicholson Contributor address; City; State; Zip Code 4835 Isleworth Dr Irving TX 75038	Amount of contribution (\$) <b>25.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/10/2024	Full name of contributor out-of-state PAC (ID#: Pam Pringle Contributor address; City; State; Zip Code 6116 Amalfi Dr Frisco TX 75035	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/10/2024	Full name of contributor out-of-state PAC (ID#: Sonia Conner Contributor address; City; State; Zip Code 6355 Enterprise Drive #251 Frisco TX 75033	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers)
4 Date 01/12/2024	5 Full name of contributor out-of-state PAC (ID#: _____) EJ Hawkins 6 Contributor address; City; State; Zip Code 15919 Fig Lane Frisco TX 75035	7 Amount of contribution (\$) <b>40.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Jan Richey Contributor address; City; State; Zip Code 7838 Element Ave Plano TX 75024	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/18/2024	Full name of contributor out-of-state PAC (ID#: _____) Valorie Arce Contributor address; City; State; Zip Code 7226 Switchgrass Rd Frisco TX 75033	Amount of contribution (\$) <b>10.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/19/2024	Full name of contributor out-of-state PAC (ID#: _____) Jertonya Feemster Contributor address; City; State; Zip Code 6633 Hickman Pkwy Frisco TX 75034	Amount of contribution (\$) <b>75.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers)
4 Date 01/20/2024	5 Full name of contributor out-of-state PAC (ID#: Thomas Jones 6 Contributor address; City; State; Zip Code 11892 Tangerine Lane Frisco TX 75035	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/20/2024	Full name of contributor out-of-state PAC (ID#: Terrance Jones Contributor address; City; State; Zip Code 11990 Mikaela Drive Frisco TX 75033	Amount of contribution (\$) <b>150.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2024	Full name of contributor out-of-state PAC (ID#: Robert Thomas Contributor address; City; State; Zip Code 4309 Palmdale Dr Plano TX 75024	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/23/2024	Full name of contributor out-of-state PAC (ID#: Del & Ann Harris Contributor address; City; State; Zip Code 2745 Montreaux Dr Frisco TX 75034	Amount of contribution (\$) <b>150.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers)
4 Date 01/25/2025	5 Full name of contributor out-of-state PAC (ID#: Cindy Hons 6 Contributor address; City; State; Zip Code 7145 Yellowstone Dr Frisco TX 75033	7 Amount of contribution (\$) <b>50.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/25/2024	Full name of contributor out-of-state PAC (ID#: Carroll Mancil Contributor address; City; State; Zip Code 11159 Powder Horn Ln	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/25/2024	Full name of contributor out-of-state PAC (ID#: Cathy Henesey Contributor address; City; State; Zip Code 4633 Firestone Dr Frisco TX 75034	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/25/2024	Full name of contributor out-of-state PAC (ID#: Jake Petras Contributor address; City; State; Zip Code 2774 Bandolier Lane Frisco TX 75033	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers) .
4 Date 01/25/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Rejonia Smith 6 Contributor address; City; State; Zip Code 5775 Parkwood Boulevard #426 Frisco TX 75034	7 Amount of contribution (\$)  <b>20.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/25/2024	Full name of contributor out-of-state PAC (ID#: _____) Janette Ansolabehere Contributor address; City; State; Zip Code 2070 Flagship Court Frisco TX 75036	Amount of contribution (\$)  <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/25/2024	Full name of contributor out-of-state PAC (ID#: _____) Psyche Terry Contributor address; City; State; Zip Code 1778 Torrey Pines Ln Frisco TX 75034	Amount of contribution (\$)  <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/25/2024	Full name of contributor out-of-state PAC (ID#: _____) Hillis Davis Contributor address; City; State; Zip Code 11228 Classic Ln Frisco TX 75033	Amount of contribution (\$)  <b>20.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME <b>Angelia Pelham</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>01/25/2024</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>Laxmi Tummala</b> 6 Contributor address; City; State; Zip Code <b>14708 Harmony Lane Frisco TX 75035</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>01/25/2024</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Tiffany Wells</b> Contributor address; City; State; Zip Code <b>4669 Liam Drive Frisco TX 75034</b>	Amount of contribution (\$) <b>1,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>01/25/2024</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Phil Crimmins</b> Contributor address; City; State; Zip Code <b>3108 Hampshire Ct Frisco TX 75034</b>	Amount of contribution (\$) <b>2,500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>01/25/2024</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Carmen Garner</b> Contributor address; City; State; Zip Code <b>4248 Pinewood Dr Plano TX 75093</b>	Amount of contribution (\$) <b>40.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME <b>Angelia Pelham</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>01/26/2024</b>	5 Full name of contributor out-of-state PAC (ID#: <b>Ivy Sun</b> 6 Contributor address; City; State; Zip Code <b>111241 Luchenbach Drive Frisco TX 75035</b>	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>01/27/2024</b>	Full name of contributor out-of-state PAC (ID#: <b>Stephanie Howard</b> Contributor address; City; State; Zip Code <b>3845 Fairbanks Dr 75033</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>02/01/2024</b>	Full name of contributor out-of-state PAC (ID#: <b>Richard &amp; Kathy Taylor</b> Contributor address; City; State; Zip Code <b>8905 Shorecrest Rd Frisco TX 75036</b>	Amount of contribution (\$) <b>75.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>01/25/2024</b>	Full name of contributor out-of-state PAC (ID#: <b>William E Langford</b> Contributor address; City; State; Zip Code <b>4171 Langford Frisco TX 75033</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers) .
4 Date 01/25/2024	5 Full name of contributor out-of-state PAC (ID#: Bill/Ann Johnston 6 Contributor address; City; State; Zip Code 7404 Pasatiempo Dr Frisco TX 75036	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/25/2024	Full name of contributor out-of-state PAC (ID#: Lianne Friedel Contributor address; City; State; Zip Code 867 Burnswick Isles Way Frisco TX 75036	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2024	Full name of contributor out-of-state PAC (ID#: Osiris Wade Contributor address; City; State; Zip Code 3132 Villandry Ln Frisco TX 75033	Amount of contribution (\$) <b>20.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2024	Full name of contributor out-of-state PAC (ID#: Chester Cambers Contributor address; City; State; Zip Code 1403 Crockett Drive Frisco TX 75033	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers)
4 Date 01/20/2024	5 Full name of contributor out-of-state PAC (ID#: Adrian Escalante 6 Contributor address; City; State; Zip Code 4401 Liam Dr Frisco TX 75034	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/02/2024	Full name of contributor out-of-state PAC (ID#: Anwer Azam Contributor address; City; State; Zip Code 2336 San Andres Dr Frisco TX 75033	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2024	Full name of contributor out-of-state PAC (ID#: Monigo Saygbay-Hallie Contributor address; City; State; Zip Code 12489 Salt Grass Ln Frisco TX 75035	Amount of contribution (\$) <b>200.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2024	Full name of contributor out-of-state PAC (ID#: Naima Laird Contributor address; City; State; Zip Code 5995 Gordan Street Apt 1206 Frisco TX 75034	Amount of contribution (\$) <b>30.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers)
4 Date 02/04/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Beverly Green-Rivers 6 Contributor address; City; State; Zip Code 9739 Beckett Drive Frisco TX 75035	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2024	Full name of contributor out-of-state PAC (ID#: _____) Linda Reagor Contributor address; City; State; Zip Code 1119 Spyglass Hill Ln Frisco TX 75036	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2024	Full name of contributor out-of-state PAC (ID#: _____) Adrienne Green Contributor address; City; State; Zip Code 817 Drohomer Place Baltimore MD 21210	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2024	Full name of contributor out-of-state PAC (ID#: _____) Robin Bennette Contributor address; City; State; Zip Code 5485 Hidden Creek Ln Frisco TX 75036	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers)
4 Date 02/15/2024	5 Full name of contributor out-of-state PAC (ID#: John Viola 6 Contributor address; City; State; Zip Code 7 Savannah Circle Frisco TX 75034	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/16/2024	Full name of contributor out-of-state PAC (ID#: Rhonda Moon Contributor address; City; State; Zip Code 2800 Belclaire Dr Frisco TX 75034	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2024	Full name of contributor out-of-state PAC (ID#: Laurie Johnson Contributor address; City; State; Zip Code 3132 Seneca Dr Frisco TX 75034	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2024	Full name of contributor out-of-state PAC (ID#: Linda Jones Contributor address; City; State; Zip Code 10304 Old Eagle River Ln McKinney TX 75072	Amount of contribution (\$) <b>25.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**20****2** FILER NAME

Angelia Pelham

**3** Filer ID (Ethics Commission Filers)**4** Date

02/20/2024

**5** Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Susie Weekley

**7** Amount of contribution (\$)**100.00****6** Contributor address;

City;

State;

Zip Code

2468 St, Laurent Place Frisco TX 75034

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/21/2024

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Kim Meltzer

Amount of contribution (\$)

**500.00**

Contributor address;

City;

State;

Zip Code

4820 Orchard Park Dr Frisco TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/22/2024

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Michael Mangum

Amount of contribution (\$)

**250.00**

Contributor address;

City;

State;

Zip Code

5620 Montreaux Dr Frisco TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/17/2024

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Karen McFarland

Amount of contribution (\$)

**500.00**

Contributor address;

City;

State;

Zip Code

5013 Pinehurst Dr Frisco TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**20****2** FILER NAME

Angelia Pelham

**3** Filer ID (Ethics Commission Filers)**4** Date

02/16/2024

**5** Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Ron Fry

**7** Amount of contribution (\$)**20.00****6** Contributor address;

City;

State;

Zip Code

5849 Stone Mountain Rd The Colony TX 75056

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/13/2024

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

James Gissler

Amount of contribution (\$)

**500.00**

Contributor address;

City;

State;

Zip Code

2959 Montreaux Dr Frisco TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/21/2024

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Will Kolberg

Amount of contribution (\$)

**100.00**

Contributor address;

City;

State;

Zip Code

8089 Rabbit Drive Frisco TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/21/2024

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Todd &amp; Heather Lisle

Amount of contribution (\$)

**2,500.00**

Contributor address;

City;

State;

Zip Code

5378 Beacon Hill Dr Frisco TX 75036

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers)
4 Date 03/01/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Nikki Harper 6 Contributor address; City; State; Zip Code 360 West Frontier Pkwy Prosper TX 75078	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/01/2024	Full name of contributor out-of-state PAC (ID#: _____) Mark Williams Contributor address; City; State; Zip Code 6873 Massa Lane Frisco TX 75034	Amount of contribution (\$) <b>260.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/01/2024	Full name of contributor out-of-state PAC (ID#: _____) Kent Montgomery Contributor address; City; State; Zip Code 7808 Secluded Avenue Plano TX 75024	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/01/2024	Full name of contributor out-of-state PAC (ID#: _____) Kevin Stephens Contributor address; City; State; Zip Code 8496 Stone River Dr Frisco TX 75034	Amount of contribution (\$) <b>200.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**20****2** FILER NAME

Angelia Pelham

**3** Filer ID (Ethics Commission Filers)**4** Date

03/02/2024

**5** Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Prakasarao Velagapudi

**7** Amount of contribution (\$)**250.00****6** Contributor address;

City;

State;

Zip Code

14726 Harmony Ln Frisco TX 75035

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/01/2024

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Joe &amp; Tara Buckner

Amount of contribution (\$)

**50.00**

Contributor address;

City;

State;

Zip Code

1733 Flowers Dr Carrollton TX 75007

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/01/2024

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Ken &amp; Dwana Frank

Amount of contribution (\$)

**100.00**

Contributor address;

City;

State;

Zip Code

4969 Buena Vista Dr Frisco TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/02/2024

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

VG &amp; Swarajya Perni

Amount of contribution (\$)

**150.00**

Contributor address;

City;

State;

Zip Code

2717 Arabian Dr Hubbard OH 44425

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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



## SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 2	
2 FILER NAME Angelia Pelham		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/15/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debbie Manos 7 Contributor address; City; State; Zip Code 3181 Seneca Dr Frisco TX 75034	8 Amount of Contribution \$ 1,123.00 Check if travel outside of Texas. Complete Schedule T.	9 In-kind contribution description Food/Drinks
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rachel Priya Benson Contributor address; City; State; Zip Code 3633 Twin Pond Trl, Euless, TX 76040	Amount of Contribution \$ 2,000.00 Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description Videographer
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

## SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <b>2</b>	
2 FILER NAME <b>Angelia Pelham</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ <b>0.00</b>	
5 Date  01/25/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Katie Scullin</b> ..... 7 Contributor address; City; State; Zip Code <b>12 Canyon Crest Ct. Frisco TX 75034</b>	8 Amount of Contribution \$  150.00	9 In-kind contribution description  Balloon Arch
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date  01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Courtney Reed</b> ..... Contributor address; City; State; Zip Code <b>9796 Hawks Landing Frisco TX 75034</b>	Amount of Contribution \$  500.00	In-kind contribution description  Wine
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <b>Sales Representative</b>		Employer (FOR NON-JUDICIAL) (See Instructions) <b>Scout &amp; Cellar</b>	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

# 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  
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: <b>4</b>	2 FILER NAME Angelia Pelham	3 Filer ID (Ethics Commission Filers)
4 Date 01/25/2024	5 Payee name Emery Varrie II	
6 Amount (\$) <b>400.00</b>	7 Payee address; City; State; Zip Code 10915 Red Cedar Dr Frisco TX 75035	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Music/Entertainment
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03/13/2024	Payee name L2, Inc.	
Amount (\$) <b>375.45</b>	Payee address; City; State; Zip Code 5 Schalks Crossing Road, Ste 220 Plainsboro, NJ 08536	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Voter Lists	Description Voting demographics
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 02/16/2024	Payee name Mulhollands Custom Imprints	
Amount (\$) <b>1,742.05</b>	Payee address; City; State; Zip Code 1200 West Berry Ft Worth TX 76110	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising/Marketing	Description T-shirts, Signs, badges, marketing materials
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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  
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: <b>4</b>	2 FILER NAME Angelia Pelham	3 Filer ID (Ethics Commission Filers)
4 Date 02/25/2024	5 Payee name Community Impact	
6 Amount (\$) <b>2,175.00</b>	7 Payee address; City; State; Zip Code 3803 Parkwood Blvd Frisco TX 75034	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Marketing/Advertisement	(b) Description Print/Digital ads
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03/25/2024	Payee name Community Impact	
Amount (\$) <b>3,575.00</b>	Payee address; City; State; Zip Code 3803 Parkwood Blvd Frisco TX 75034	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Marketing/Advertisement	Description Print/Digital ads
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 02/25/2024	Payee name StarLocal (Frisco Enterprise)	
Amount (\$) <b>2,470.00</b>	Payee address; City; State; Zip Code 3501 E. Plano Pkwy #200 Plano, TX 75074	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Marketing/Advertisement	Description Print/Digital ads
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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  
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: <b>4</b>	2 FILER NAME Angelia Pelham	3 Filer ID (Ethics Commission Filers)
4 Date 01/25/2024	5 Payee name Hope Floats Creative LLC	
6 Amount (\$) <b>1,100.00</b>	7 Payee address; City; State; Zip Code 1915 E. Victory Dr. Ste E-1073 Savannah, GA 31404	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Advertising/Marketing	(b) Description Magazine Ad-March
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03/13/2024	Payee name Rachel Priya Benson	
Amount (\$) <b>1,000.00</b>	Payee address; City; State; Zip Code 3633 Twin Pond Trl, Euless, TX 76040	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Videography/Advertising	Description Video
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03/05/2024	Payee name Mulhollands Custom Imprints	
Amount (\$) <b>372.92</b>	Payee address; City; State; Zip Code 1200 West Berry Ft Worth TX 76110	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising/Marketing	Description T-shirts, Signs, badges, marketing materials
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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  
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: <b>4</b>	2 FILER NAME Angelia Pelham	3 Filer ID (Ethics Commission Filers)
4 Date 01/09/2024	5 Payee name On the Marquee	
6 Amount (\$) <b>914.14</b>	7 Payee address; City; State; Zip Code 6560 John Hickman Pkwy Suite 100 Frisco TX 75034	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Event space rental
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 01/21/2024	Payee name Chef NIC & Company	
Amount (\$) <b>1,727.77</b>	Payee address; City; State; Zip Code 6065 Sports Village Rd #700 Frisco TX 75034	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Catering & Food Service	Description Food for Kick-Off
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 01/25/2024	Payee name Jordan Knowles (Knowles Group LLC)	
Amount (\$) <b>300.00</b>	Payee address; City; State; Zip Code 3420 Sedona Ln Plano, TX 75025	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Valet Parking Services	Description Parking at Kick-Off
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		