	TE / OFFICEHOLDER N FINANCE REPORT			FORM C/OH COVER SHEET PG 1
The C/OH Instruction	Guide explains how to complete th	is form. 1 Filer ID		2 Total pages filed: 9
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRS		MI 0 7	OFFICE USE ONLY Date Received
	NICKNAME LAS Dar	10700	SUFFIX	Date Received 24P 04:47 RCVO
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUI 4747 Research Forest Dr #180 Box 10 The Woodlands, TX 77381	TE#; CITY;	ZIP CODE	Date Processed Date Imaged
				Date inaged
5 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRS	acK	М	
	NICKNAME LAST	т	SUFFIX	
	Lo	iwe		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX 31 Somerse The Woodlan	et Pond Pl		STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	area code Phone NU 281-705			
8 REPORT TYPE		oth day before election	Runoff Exceeded modified reporting limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year 10/31/2023	THROUGH	Month Day 12/31/2023	Year 3
10 ELECTION	ELECTION DATE Month Day Year 11/07/2023	Primary X General	ELECTION TYPE Runoff Special	Other
11 OFFICE	OFFICE HELD (if any) None Montgomery		12 OFFICE SOUGHT The Woodlands To District Woodland	Township Board of Directors
		GO TO PAGE 2		
Forms provided by To	exas Ethics Commission	www.ethics.state.tx.u	IS	Version V3.5.1.0bfcfb6

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH **COVER SHEET PG 2**

				2 of 9					
13 C / OH NAME	Danto, Tricia	14 Filer II)						
This box is for notice of political contributions accepted or political expenditures made by political committee candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's consent. Candidates and officeholders are required to report this information only if they receive notice of su COMMITTEE(S)									
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		32-01-01-01-01-01-01-01-01-01-01-01-01-01-					
_	GENERAL								
		COMMITTEE ADDRESS							
	SPECIFIC								
		COMMITTEE CAMPAIGN TREASURER NAME		4.					
		COMMITTEE CAMPAIGN TREASURER ADDRESS							
		COMMITTEE CAME AIGN TREASURER ABBRESS							
16 CONTRIBUTION	TOTAL UNITEM	I ZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGE	ES, LOANS,	·					
TOTALS	OR GUARANTE	ES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONIC	ALLY)	\$ 0.00					
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)								
EXPENDITURE TOTALS	URE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES								
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 13,837.54					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY RIOD	OF THE	\$ 224.14					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE L TING PERIOD	AST DAY	\$ 0.00					
17 AFFIDAVIT									
	MINISTER OF THE PROPERTY OF THE PARTY OF THE								
	WE ANN MONING	I swear, or affirm, under penalty of perjury	, that the accon	npanying report is					
iiii.	JARY PUB POIL	true and correct and includes all informati							
<u> </u>	O Z	under Title 15, Election Code.							
1	St 7 5	$\Lambda \sim 9$	1						
	OF OF TEN			$\sqrt{}$					
14	SPECE TETE	0).0	$\supset \mathcal{K}$						
	Thuman min	Signature of Candidate	or Officeholder	r					
I	TARY STAMP / SEAL ABO								
		Tricia Danto	174	1					
Sworn to and subso	cribed before me, by the s	aid, this the ertify which, witness my hand and seal of office.	ne	day					
0									
Van 1	1/2-	LAUDE A MARCHITA	MAKO ~						
mucz	MANA		(N9HP 9						
Signature of offic	er administering	Printed name of officer administering	nue of omicer ac	dministering oath					
<u> </u>	voa Ethias Commission								

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

	3 of 9
19 Filer ID	
	SUBTOTAL AMOUNT
	SOBTOTAL AMOUNT
\$	1,650.00
\$	
\$	
\$	
\$	13,837.54
\$	
ONS \$	
\$	
\$	
OF C/OH \$	
ons \$	
RETURNED \$	
	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/9	
2	FILER NAME Danto, Tricia			3 Filer ID	
4	Date 11/30/2023	 5 Full name of contributor out-of-state PAC (ID#:_Danto, Tricia 6 Contributor address; City; State; Zip Code The Woodlands, TX 77381 	7 Amount of Contribution (\$)	\$750.00	
8	Principal occu	pation / Job title (See Instructions))		
	Date 11/09/2023	Full name of contributor out-of-state PAC (ID#:_Lowe, Zach Contributor address; City; State; Zip Code The Woodlands, TX 77381		Amount of Contribution (\$)	\$400.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)	
	Date 12/15/2023	Full name of contributor out-of-state PAC (ID#:_ Snyder, Jerry Contributor address; City; State; Zip Code The Woodlands, TX 77380		Amount of Contribution (\$)	\$200.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)	
	Date 11/06/2023	Full name of contributor out-of-state PAC (ID#:_ Weik, Justin Contributor address; City; State; Zip Code Manteo, NC 27954		Amount of Contribution (\$)	\$50.00
	Principal occu Sales	pation / Job title (See Instructions)	Employer (See Instructions Glassdoor)	
	Date 11/06/2023	Full name of contributor out-of-state PAC (ID#:_Wilmoth, Steven Contributor address; City; State; Zip Code The Woodlands, TX 77381		Amount of Contribution (\$)	\$250.00
	Principal occu Petroleum G	pation / Job title (See Instructions) eologist	Employer (See Instructions Self Employed)	

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Fees

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		ommittee Le	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid	xpense		Expense Wages/	se s/Contract Labor	Travel Out of District OTHER (enter a category not listed	above)
1	Total pages Schedule F1:	2	FILER NAME						3 Filer ID	
	Sch: 1/5 Rpt: 5/9		Danto, Tricia	Ĺ						
4	Date	5	Payee name							
	11/07/2023		Alpha Graphi	ics						
6	Amount (\$)	7	Payee address	s; City;	State	; Zip C	ode			
	\$262.09		2319 Timber	rloch PI Suite A,						
			The Woodlar	nds, TX 77380						
8	PURPOSE	(a'	Category (See	e Categories listed at the	top of this sch	nedule)	(b)	Description		
2001	OF EVDENDITURE		Advertising E			,		Check if travel	outside of Texas. Complete Schedule T.	
	EXPENDITURE			· ·					n, TX, officeholder living expense	
	1							Yard Signs		
		L					L			
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Office	eholder name		Office so	ught		Office held	
_	Date		Payee name							
	11/16/2023		Balakirev, Ol	lga						
	Amount (\$)		Payee address	ss; City;	State	; Zip C	ode			
	\$150.00		103 S Wyckh	ham						
			930 tangengapaga							
			Spring, TX 7	7382						
	PURPOSE	(a	Category (Ser	e Categories listed at the	top of this sch	nedule)	(b)	Description		
	OF	,	Advertising E		top or and	Come	10000	Check if travel	outside of Texas. Complete Schedule T.	
	EXPENDITURE		The American State of the Control of	#1000 Province appearance					n, TX, officeholder living expense	
								Campaign H	eadshots	
L		L							- " L.I.I	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Office	eholder name	(Office so	ught		Office held	
	experiunture to benefit coo.	-								
	Date	Γ	Payee name							
	11/15/2023		Clockwork C	Consulting			-			
	Amount (\$)	\vdash	Payee address	ss; City;	State	; Zip C	Code			
	\$1,727.00		1347 Lamon	nte						
			Houston, TX	77018					v mense statistical	
	PURPOSE	(a	Category (Se	ee Categories listed at the	e top of this sci	hedule)	(b)	Description		
	OF EXPENDITURE		Advertising E		36	30			l outside of Texas. Complete Schedule T.	
	EXPENDITURE			- ·					n, TX, officeholder living expense	
								Campaign T	exting	
L		L								
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	(Office so	ought		Office held	
L	experience to serious con-									

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Food/Beverage Expense

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

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Gift/Awards/Memorials Legal Services The Instruction Gu			Vages	/Contract Labor	Travel Out of District OTHER (enter a category	not listed above)	
			ide expianio	now to co	mpic		et- in			
1	Total pages Schedule F1:	2						3	Filer ID	
	Sch: 2/5 Rpt: 6/9		Danto, Trici	a						
4	Date	5	Payee name							
	11/03/2023		Exxon							
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	ode			
	\$30.24		1470 Lake	Woodlands Drive	9					
			The Woodl	ands, TX 77381						
•	PURPOSE	(0)					(b)	Description		
8	OF	(a)		ee Categories listed at the head/Rental Exp		hedule)	(0)		le of Texas. Complete Sch	edule T.
	EXPENDITURE		Office Over	neau/Rentai Exp	Jense				officeholder living expense	
								Campaign Suppl	ies	
9	Complete ONLY if direct	_	Candidate/Off	iceholder name		Office sou	ight		Office held	
_	expenditure to benefit C/O									
-	Date		D				_			
	Date		Payee name Facebook							
	11/09/2023	L								
	Amount (\$)		Payee addre		State	; Zip Co	ode			
	\$1,067.07		1 Hacker W	/ay						
			Menlo Park	, CA 94025						
	PURPOSE	(a	Category (5	see Categories listed at the	ne top of this sc	hedule)	(b)	Description		
	OF		Advertising						de of Texas. Complete Sch	nedule T.
	EXPENDITURE			***************************************					officeholder living expense	,
								Online Advertisir	ng	
					A NEW YORK ON THE PARTY OF THE PARTY OF					
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	9	Office sou	ught		Office held	
	experiulture to benefit C/Oi	o.								
	Date	Γ	Payee name	,						
	11/16/2023	1	Majority St	rategies						
_	Amount (\$)	Т	Payee addre	ess; City;	State	e; Zip Co	ode			
	\$1,825.00	١	12854 Ken	an Dr						
		l								
			lacksonvill	e, FL 32258						
L		-					T/b)	Daniel de la constant		
	PURPOSE OF	(a		See Categories listed at t	he top of this so	chedule)	(D)	Description Check if travel outsi	de of Texas. Complete Sch	nedule T.
	EXPENDITURE		Advertising	Expense			l		officeholder living expense	
		ı					1	Campaign Push	cards	
-	Complete ONLY if direct	_	Candidate/Of	ficeholder name		Office so	ught		Office held	
	expenditure to benefit C/O									
-										
ı										

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment				Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide		Printin Salarie		e /Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAM	 E					3	Filer ID
	Sch: 3/5 Rpt: 7/9		Danto, Tric	ia						
4	Date	5	Payee name	·					_	
ľ	11/30/2023		Pale Rider							
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zin	Code			
ľ	\$1,500.00	ľ	3505 South		State,	Z.p	oouc			
ı	42,000.00									
			Austin, TX	78704						
8	PURPOSE	(a)	Category (S	See Categories listed at the t	op of this sch	edule)	(b)	Description		
	OF EXPENDITURE		Advertising	Expense			1	므		side of Texas. Complete Schedule T.
ı							1	Website	, IX	c, officeholder living expense
								Website		
9	Complete ONLY if direct	Ц,	Candidate/Of	ficeholder name		office s	ought		-	Office held
_	expenditure to benefit C/Ol		Candidate/On	ncerioidei riairie		office s		***************************************		Office field
Г	Date		Payee name)						
	12/20/2023		Raise The	Money						
Г	Amount (\$)		Payee addre	ess; City;	State;	Zip	Code			
	\$41.23		PO Box 26	466						
ı										
			Little Rock	AR 72221						
H	PURPOSE	(a)	Category (s	See Categories listed at the t	on of this sch	edule)	(b)	Description		
ı	OF EXPENDITURE	A 3 0 5	Fees	J				Check if travel	outs	side of Texas. Complete Schedule T.
ı	EXPENDITORE						4			K, officeholder living expense
ı								Online Fundr	ais	sing Fees
L		L					٠,			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Of	ficeholder name	C	office s	ought			Office held
L		_							_	
ı	Date		Payee name	2						
L	11/09/2023		Shell							
	Amount (\$)		Payee addre		State;	Zip	Code			
	\$24.85		1395 Many	Pines Rd						
1			The Woodl	ands, TX 77380						
r	PURPOSE	(a)	Category (5	See Categories listed at the t	op of this sch	edule)	(b)	Description		was at the same of the same and
ı	OF EXPENDITURE	1,255		rhead/Rental Expe						side of Texas. Complete Schedule T.
	EXPENDITORE							_		c, officeholder living expense
1								Campaign Su	upp	piles
L		L							_	0.5
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Of	ficeholder name	C	office s	ought			Office held
L										

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

ent Expense
es Office Overhead/Rental Expense
Polling Expense

Fees Office Contract Refres Polling Expense
Gift/Awards/Memorials Expense
Legal Services Salaries/Wages/Contract Lab

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services 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
Sch: 4/5 Rpt: 8/9	Danto, Tricia
4 Date	5 Payee name
10/31/2023	Starbucks
\$ Amount (\$) \$15.86	7 Payee address; City; State; Zip Code 9595 Six Pines The Woodlands, TX 77380
B PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Coffees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/12/2023	Surefire Public Affairs
Amount (\$) \$6,249.00	Payee address; City; State; Zip Code 15700 Cinca Terra Dri Austin, TX 78738
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 Fees
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 11/09/2023	Payee name Uhaul
Amount (\$) \$404.40	Payee address; City; State; Zip Code 1626 Sawdust rd The Woodlands, TX 77380
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Uhaul Truck
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Fees Food/Beverage Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Cor	nmittee	Gift/Awards/Memoria Legal Services The Instruction	als Expense Guide explains h	The second second	es/Contract Labor	Travel Out of I OTHER (enter	District a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME	<u> </u>				3 Filer ID	Maria	
	Sch: 5/5 Rpt: 9/9		Danto, Trici							
4	Date	5	Payee name							
	10/31/2023		United Airlin	nes						
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Code	:			
	\$540.80		233 South	Wacker Drive						
			Chicago, IL	. 60606		- entricana da				
8	PURPOSE	(a)	Category (S	see Categories listed a	at the top of this sche	dule) (b) Description			
	OF		Travel Out					outside of Texas. Co		
ı	EXPENDITURE	ı				1		n, TX, officeholder livi	ng expense	
ı		l				10	Flights			
ı		l								
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	iceholder name	0	ffice sough	t	Office	held	