FORM C/OH CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. CANDIDATE / MS / MRS / MR FIRST MI OFFICE USE ONLY **OFFICEHOLDER** Richard NAME Date Received NICKNAME LAST SUFFIX Franks CANDIDATE / ADDRESS / PO BOX: APT / SUITE #: CITY: ODE **OFFICEHOLDER** MAILING **ADDRESS** #208 The Woodlands, TX Change of Address Date Processed Date Imaged FIRST CAMPAIGN MS / MRS MR MI **TREASURER** NAME NICKNAME SUFFIX Schuh STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CAMPAIGN STATE: ZIP CODE **TREASURER** 62 N. Overlyn Pi The Wood lands 77381 **ADDRESS** (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER EXTENSION **TREASURER** 281 844-2539 PHONE 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 Final Report (Attach C/OH-FR) |X|reporting limit PERIOD Month Day Year Month Day Year COVERED 01/01/2024 THROUGH 06/30/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 X General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) The Woodlands Township Board of Directors District The Woodlands Township Board of Directors Woodlands Montgomery District Woodlands

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Version V4.1.0.d378aba0

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

of 10

				2 01 10
13 C / OH NAME	Franks, Richard		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without i d officeholders are required to report this information	the candidate's or officeho	older's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 14,701.00
EXPENDITURE TOTALS	3. TOTAL UNITEMI	IZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	CAL EXPENDITURES		\$ 233.77
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	AST DAY OF THE	\$ 13,185.13
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
Nota My (AUREN JADE SAENZ ary Public, State of Texas Comm. Exp. 04-23-2025 ID No. 13306170-0	I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code. Signature of		be reported by me
AFFIX NOT	TARY STAMP / SEAL ABO	OVE	-	r san
Sworn to and subsc	cribed before me, by the sa	ertify which, witness my hand and seal of office.	, this the151	day
Signature of office	eradministering	Printed name of officer administering	Pusonal but	MKILY OFFICEN dministering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

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				3 01 10
18 FILER NAME Franks, Richard		19 Filer ID		
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT		
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS				12,125.00
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	2,576.00		
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$			
4. SCHEDULE E: LOANS			\$	
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIB	UTION	IS	\$	233.77
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			\$	
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTR	RIBUTI	IONS	\$	
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			\$	
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS				
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSI	NESS	OF C/OH	\$	
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTR	RIBUTI	IONS	\$	
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT	'IONS	RETURNED	\$	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/5 Rpt: 4/10 2 FILER NAME 3 Filer ID Franks, Richard Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/21/2024 Anthony, Linda \$250.00 6 Contributor address; City; State; Zip Code The Woodlands, TX 77382 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$200.00 06/21/2024 Bass, Diane Contributor address; City; State; Zip Code Conroe, TX 77384 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date 06/21/2024 \$100.00 Berry, Steve Contributor address; City; State; Zip Code The Woodlands, TX 77382 Principal occupation / Job title (See Instructions) Employer (See Instructions) VP Waste Connection Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 06/21/2024 \$250.00 Blair Law Firm, Nelda Contributor address; City; State; Zip Code 7 Grogans Park Dr Bldg 3 The Woodlands, TX 77380 Employer (See Instructions) Principal occupation / Job title (See Instructions) Blair Law Firm Principal Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 06/21/2024 \$50.00 Bottorft, Mathew Contributor address; City; State; Zip Code The Woodlands, TX 77382 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/5 Rpt: 5/10 2 FILER NAME 3 Filer ID Franks, Richard 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$2,000.00 06/21/2024 Brady, Kevin 6 Contributor address; City; State; Zip Code The Woodlands, TX 77387 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$500.00 06/14/2024 Carmen, James Contributor address; City; State; Zip Code The Woodlands, TX 77381 Principal occupation / Job title (See Instructions) Employer (See Instructions) President Howard Hughes Devel Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$100.00 06/21/2024 Cooke, Walter Contributor address; City; State; Zip Code The Woodlands, TX 77381 Principal occupation / Job title (See Instructions) Employer (See Instructions) Cooke Law Firm Lawver Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/21/2024 \$500.00 Ertel, Susan Contributor address; City; State; Zip Code The Woodlands, TX 77381 Principal occupation / Job title (See Instructions) Employer (See Instructions) Houswife Houswife Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/24/2024 Franks, Mathew \$400.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Armstrong Lee Baker LLP

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/5 Rpt: 6/10 2 FILER NAME 3 Filer ID Franks, Richard Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/20/2024 Franks, Pam \$100.00 6 Contributor address; City; State; Zip Code The Woodlands, TX 77381 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Agent Compass Reality Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 06/21/2024 \$3,500.00 Hagg, Orpha Contributor address; City; State; Zip Code The Woodlands, TX 77381 Principal occupation / Job title (See Instructions) Employer (See Instructions) Champian Fiberglass Owner Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/24/2024 \$250.00 Harris, Jeffrey Contributor address; City; State; Zip Code The Woodlands, TX 77381 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$1,000.00 06/21/2024 Hauser, Dan Contributor address; City; State; Zip Code The Woodlands, TX 77380 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/21/2024 Hoffstadter, Aaron \$250.00 Contributor address; City; State; Zip Code The Woodlands, TX 77380 Principal occupation / Job title (See Instructions) Employer (See Instructions) FistCash Holdings Sn Reg Mgr

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/5 Rpt: 7/10 2 FILER NAME 3 Filer ID Franks, Richard Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 06/21/2024 Holmes, Frank \$100.00 6 Contributor address; City; State; Zip Code The Woodlands, TX 77381 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/21/2024 \$500.00 Kirk, Demi Contributor address; City; State; Zip Code Spring, TX 77389 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 06/21/2024 Lisiewski, Walt \$250.00 Contributor address; City; State; Zip Code The Woodlands, TX 77381 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 06/07/2024 Schuh, Paul \$25.00 Contributor address; City; State; Zip Code The Woodlands, TX 77381 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 06/24/2024 \$300.00 Short, Ann Contributor address; City; State; Zip Code The Woodlands, TX 77381 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/5 Rpt: 8/10 2 FILER NAME 3 Filer ID Franks, Richard Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 06/21/2024 Tice, Cindy \$1,000.00 6 Contributor address; City; State; Zip Code The Woodlands, TX 77381 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/21/2024 \$500.00 Wiggins, Gail Contributor address; City; State; Zip Code The Woodlands, TX 77375 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.d378aba0

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 9/10
2 FILER NAME		3 Filer ID
Franks, Richard		o Fina IU
⁴ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 06/21/2024 6 Full name of contributor out-of-state PAC (ID#:	11 Employer (FOR NON-	8 Amount of contribution (\$) In-kind contribution description \$2,576.00 Event Supplies
Owner	Polyseed	(SOBICIAL) (SEE INSUBSISION)
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 contributo	r's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Accounting/Banking Consulting Expense

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		Gift/Awards/Memorials Expens Legal Services The Instruction Guide ex	Salaries/	Wages	s/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
Total pages Schedule F1:	2 FILER NAME				3	Filer ID
Sch: 1/1 Rpt: 10/10						
Date	5 Payee name					
06/30/2024	Frost Bank					
Amount (\$)	7 Payee addres	ss; City;	State; Zip Co	ode		
\$60.00	215 E Shore	е				
	The Woodla	ands, TX 77380				
PURPOSE	(a) Category (So	ee Categories listed at the top of	of this schedule)	(b)	Description	
					_	ide of Texas. Complete Schedule T.
EXPERIENCE						officeholder living expense
					Bank Fees	
			ASSESSED OF THE PARTY OF THE PA	L		
		ceholder name	Office sou	ight		Office held
experientare to benefit or of	1.50					
Date	Payee name					
02/06/2024	Georges Br	eakfast Club				
Amount (\$)	Payee addres	ss; City;	State; Zip Co	ode		
\$125.00	9320 Lakes	ide Blvd				
	The Woodla	ands, TX 77381				
PURPOSE	(a) Category (Se	ee Categories listed at the top of	of this schedule)	(b)	Description	
그 하지 않는 사람이 다른 사람들은 사람들이 가지 않는 것이 없어?						de of Texas. Complete Schedule T.
						officeholder living expense
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Complete ONLY if direct	Condidate/Office	achalder name	Office	aht		Office hold
Complete ONLY if direct expenditure to benefit C/O	Candidate/Offi	ceholder name	Office sou	ght		Office held
expenditure to benefit C/OF		ceholder name	Office sou	ght		Office held
expenditure to benefit C/OF	H Payee name		Office sou	ght		Office held
expenditure to benefit C/OF	Н					Office held
expenditure to benefit C/OF	H Payee name	Money	Office sou			Office held
expenditure to benefit C/OFDate 06/30/2024	Payee name Raise The M	Money ss; City;				Office held
Date 06/30/2024 Amount (\$)	Payee name Raise The M	Money ss; City;				Office held
Date 06/30/2024 Amount (\$)	Payee name Raise The M	Money ss; City;				Office held
Date 06/30/2024 Amount (\$)	Payee name Raise The M Payee addres PO Box 264 Little Rock,	Money ss; City; 466 AR 72111	State; Zip Co	ode	Description	Office held
Date 06/30/2024 Amount (\$) PURPOSE OF	Payee name Raise The M Payee addres PO Box 264 Little Rock, (a) Category (See	Money ss; City; 466 AR 72111 see Categories listed at the top o	State; Zip Co	ode	Description	Office held de of Texas. Complete Schedule T.
Date 06/30/2024 Amount (\$) \$48.77	Payee name Raise The M Payee addres PO Box 264 Little Rock,	Money ss; City; 466 AR 72111 see Categories listed at the top o	State; Zip Co	ode	Check if travel outsi	
Date 06/30/2024 Amount (\$) PURPOSE OF	Payee name Raise The M Payee addres PO Box 264 Little Rock, (a) Category (See	Money ss; City; 466 AR 72111 see Categories listed at the top o	State; Zip Co	ode	Check if travel outsi	de of Texas. Complete Schedule T.
Date 06/30/2024 Amount (\$) PURPOSE OF EXPENDITURE	Payee name Raise The M Payee addres PO Box 264 Little Rock, (a) Category (Se Accounting/	Money ss; City; 466 AR 72111 see Categories listed at the top of Banking	State; Zip Co	(b)	Check if travel outsi	de of Texas. Complete Schedule T. officeholder living expense
Date 06/30/2024 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee name Raise The M Payee addres PO Box 264 Little Rock, (a) Category (Se Accounting/	Money ss; City; 466 AR 72111 see Categories listed at the top of Banking	State; Zip Co	(b)	Check if travel outsi	de of Texas. Complete Schedule T.
Date 06/30/2024 Amount (\$) PURPOSE OF EXPENDITURE	Payee name Raise The M Payee addres PO Box 264 Little Rock, (a) Category (Se Accounting/	Money ss; City; 466 AR 72111 see Categories listed at the top of Banking	State; Zip Co	(b)	Check if travel outsi	de of Texas. Complete Schedule T. officeholder living expense
Date 06/30/2024 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee name Raise The M Payee addres PO Box 264 Little Rock, (a) Category (Se Accounting/	Money ss; City; 466 AR 72111 see Categories listed at the top of Banking	State; Zip Co	(b)	Check if travel outsi	de of Texas. Complete Schedule T. officeholder living expense
	Total pages Schedule F1: Sch: 1/1 Rpt: 10/10 Date 06/30/2024 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Ol Date 02/06/2024 Amount (\$) \$125.00	Total pages Schedule F1: Sch: 1/1 Rpt: 10/10 Date 06/30/2024 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 02/06/2024 Amount (\$) Payee address Accounting/ Candidate/Office Georges Brown of the Woodla Payee address Accounting/ Candidate/Office Georges Brown of the Woodla Purpose 06 Candidate/Office Georges Brown of the Woodla Purpose 07 Candidate/Office Georges Brown of the Woodla Purpose 08 Category (see Orges Brown of the Woodla) Category (see Orges Brown of the Woodla)	Total pages Schedule F1: Sch: 1/1 Rpt: 10/10 Date 06/30/2024 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 02/06/2024 Amount (\$) Payee name Frost Bank 7 Payee address; City; 215 E Shore The Woodlands, TX 77380 (a) Category (see Categories listed at the top of Accounting/Banking) Candidate/Officeholder name Payee name Georges Breakfast Club Payee address; City; 9320 Lakeside Blvd The Woodlands, TX 77381 PURPOSE OF (a) Category (see Categories listed at the top of Office Overhead/Pantal Expenses	Total pages Schedule F1: Sch: 1/1 Rpt: 10/10 Date 06/30/2024 Amount (\$) PURPOSE OF EXPENDITURE Camplete ONLY if direct expenditure to benefit C/OH Date 02/06/2024 Payee name Candidate/Officeholder name Georges Breakfast Club Payee address; City; State; Zip Colored Candidate/Officeholder name Office source of the schedule of this schedule	Total pages Schedule F1: Sch: 1/1 Rpt: 10/10 Date 06/30/2024 Amount (\$) PURPOSE EXPENDITURE Candidate/Officeholder name 02/06/2024 Amount (\$) Payee name Georges Breakfast Club Payee address; City; State; Zip Code (a) Category (See Categories listed at the top of this schedule) Accounting/Banking Candidate/Officeholder name 02/06/2024 Amount (\$) Payee name Georges Breakfast Club Amount (\$) Payee address; City; State; Zip Code (b) Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name 02/06/2024 Complete One City State; Zip Code State: Dip Code State: Dip Code Code	The Instruction Guide explains how to complete this form. Total pages Schedule F1: Sch: 1/1 Rpt: 10/10 Franks, Richard Franks, Richard Date 06/30/2024 Frost Bank Amount (\$) 7 Payee address; City; State; Zip Code 215 E Shore The Woodlands, TX 77380 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Check if travel outs Check if Austin, TX Bank Fees Complete ONLY if direct expenditure to benefit C/OH Date Payee name Georges Breakfast Club Amount (\$) Payee address; City; State; Zip Code Georges Breakfast Club Amount (\$) Payee address; City; State; Zip Code Georges Breakfast Club Phyprose OF State; Zip Code Georges Breakfast Club Phyprose OF Georges Breakfast Club (b) Description Georges Breakfast Club (c) Georges Breakfast Club (d) Georges Breakfast Club (e) Georges Breakfast Club (e) Georges Breakfast Club (e) Georges Breakfast Club (f) Description Georges Cofe (e) Georges Breakfast Club (f) Description Georges Cofe (e) Georges Breakfast Club (f) Description Check if ravel outsi Check if Austin, TX (f)