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: 15

OFFICE USE ONLY

Date Received: Received 01/14/2025 at 11:37 p.m. via email to/by Laure Morgan, Township Secretary

Date Hand-delivered or Date Postmarked: 01/14/2025 via email

Received # | Amount $

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR | FIRST: Shelley | MI

NICKNAME | LAST: Sekula-Gibbs | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

Change of Address

ADDRESS / PO BOX: [redacted] | APT / SUITE # | CITY: The Woodlands | STATE | ZIP CODE: 77380

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: ([redacted]) | PHONE NUMBER: [redacted] | EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST: Amy | MI

NICKNAME | LAST: Van Horn | SUFFIX

7 CAMPAIGN TREASURER ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE) | APT / SUITE # | CITY | STATE | ZIP CODE: 10729 E. Timberwagon Circle, The Woodlands, TX 77380

8 CAMPAIGN TREASURER PHONE

AREA CODE: (281) | PHONE NUMBER: 376-9781 | EXTENSION

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		Month	Day	Year
	7	1	24	THROUGH	12	31	24

11 ELECTION

ELECTION DATE: Month / Day / Year

ELECTION TYPE: [ ] Primary [ ] Runoff [ ] Other Description: [ ] General [ ] Special

12 OFFICE

OFFICE HELD (if any): The Woodlands Township Director, Position 5

13 OFFICE SOUGHT (if known)

14 NOTICE FROM POLITICAL COMMITTEE(S)

Additional Pages

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THIS CANDIDATE / OFFICEHOLDER. *THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT.* CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

- [ ] GENERAL
- [ ] SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME	16 Filer ID (Ethics Commission Filers)
Shelley Sekula-Gibbs	

17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 10,715.66
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 9,780.97
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 172,237.17

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.

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

[redacted]

(2) Unsworn Declaration

My name is Shelley Sekula-Gibbs, and my date of birth is [redacted].

My address is 67 Lakeside Cove, The Woodlands, TX, 77380, USA.
(street) (city) (state) (zip code) (country)

Executed in Montgomery County, State of Tx, on the 14 day of January (month), 20 25 (year).

Shelley Sekula Gibbs

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
Shelley Sekula-Gibbs	

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4.	■	SCHEDULE E: LOANS	$ 17,500.00
5.	■	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 10,715.66
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	$

LOANS

SCHEDULE E

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 E: 1
2 FILER NAME Shelley Sekula-Gibbs	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS	$ 17,500.00

6 Date of loan 07/10/2024	7 Name of lender ☐ out-of-state PAC (ID# _____) Shelley Sekula-Gibbs	9 Loan Amount ($) 7,000.00
8 Is lender a financial institution? ☐ Y ■ N	8 Lender address; City; State; Zip Code [redacted] The Woodlands, TX 77380	10 Interest rate 0.00 11 Maturity date 12/31/2035
12 Principal occupation / Job title (See Instructions) Dermatologist	13 Employer (See Instructions) Elite Dermatology	
14 Description of Collateral ■ none	15 Check if personal funds were deposited into political account (See Instructions)	
16 GUARANTOR INFORMATION ■ not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed ($)
20 Principal Occupation (See Instructions)	21 Employer (See Instructions)	

Date of loan 11/06/2024	Name of lender ☐ out-of-state PAC (ID# _____) Shelley Sekula-Gibbs	Loan Amount ($) 10,500.00
Is lender a financial institution? ☐ Y ■ N	Lender address; City; State; Zip Code [redacted] The Woodlands, TX 77380	Interest rate 0.00 Maturity date 12/31/2035
Principal occupation / Job title (See Instructions) Dermatologist	Employer (See Instructions) Elite Dermatology	
Description of Collateral ■ none	Check if personal funds were deposited into political account (See Instructions)	
GUARANTOR INFORMATION ■ not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed ($)
Principal Occupation (See Instructions)	Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender 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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
11	Shelley Sekula-Gibbs	

4 Date	5 Payee name
07/01/2024	Google LLC

6 Amount ($)	7 Payee address; City; State; Zip Code
7.68	1600 Amphitheatre Pkwy., Mountainview, CA 94043

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead	GSuite

(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
07/05/2024	Word Enthusiast

Amount ($)	Payee address; City; State; Zip Code
1,995.02	67 Panterra Way, The Woodlands, TX 77382

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Salary/Wages/Contract Labor	Consulting Fees

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
07/08/2024	GoDaddy

Amount ($)	Payee address; City; State; Zip Code
22.17	14455 N. Hayden Rd., Suite 219, Scottsdale, AZ 85260

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	Web Site Services

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY 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	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
11	Shelley Sekula-Gibbs	

Expenditure 1

4 Date	5 Payee name
07/19/2024	Mailchimp

6 Amount ($)	7 Payee address:	City:	State:	Zip Code
106.60	675 Ponce de Leon NE, Suite 500, Atlanta, GA 30308			

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising	Email services

(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Expenditure 2

Date	Payee name
07/31/2024	Frost

Amount ($)	Payee address:	City:	State:	Zip Code
5.00	P.O. Box 1315, Houston, TX 77251			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Fees	Online Banking

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Expenditure 3

Date	Payee name
08/01/2024	Google LLC

Amount ($)	Payee address:	City:	State:	Zip Code
7.68	1600 Ampitheatre Pkwy., Mountainview, CA 94043			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Office Overhead	GSuite

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX officeholder living expense

Complete ONLY 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 Candidates/Officeholder/Political Committee
Credit Card Payment
Event Expenses
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 Expenses
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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
11	Shelley Sekula-Gibbs	

4 Date	5 Payee name
08/05/2024	Wordpress

6 Amount ($)	7 Payee address; City; State; Zip Code
99.00	60 29th Street, Suite 343, San Francisco, CA 94110

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead	Software-MAILSMTP
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
08/07/2024	Word Enthusiast

Amount ($)	Payee address; City; State; Zip Code
1,198.75	67 Panterra Way, The Woodlands, TX 77382

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Salary/Wages/Contract Labor	Consulting Fees
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
08/19/2024	Mailchimp

Amount ($)	Payee address; City; State; Zip Code
106.60	675 Ponce de Leon NE, Suite 500, Atlanta, GA 30308

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising	Email services
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX officeholder living expense

Complete ONLY 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	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
11	Shelley Sekula-Gibbs	

Expenditure 1

4 Date	5 Payee name
08/20/2024	Wordpress

6 Amount ($)	7 Payee address:	City:	State:	Zip Code
399.00	60 29th Street, Suite 343, San Francisco, CA 94110			

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead	Software-WPFORMS

(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Expenditure 2

Date	Payee name
08/31/2024	Frost

Amount ($)	Payee address:	City:	State:	Zip Code
5.00	P.O. Box 1315, Houston, TX 77251			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Fees	Online Banking

Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Expenditure 3

Date	Payee name
09/03/2024	Word Enthusiast

Amount ($)	Payee address:	City:	State:	Zip Code
2,240.00	67 Panterra Way, The Woodlands, TX 77382			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Salary/Wages/Contract Labor	Consulting Fees

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY 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:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
11	Shelley Sekula-Gibbs			
4 Date	**5 Payee name**			
09/03/2024	Google LLC			
6 Amount ($)	**7 Payee address:**	**City:**	**State:**	**Zip Code**
7.68	1600 Ampitheatre Pkwy., Mountainview, CA 94043			
8 PURPOSE OF EXPENDITURE	**(a) Category** (See Categories listed at the top of this schedule)	**(b) Description**		
	Office Overhead	GSuite		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	**Candidate / Officeholder name**	**Office sought**		**Office held**

Date	Payee name			
09/03/2024	Susan Cochran			
Amount ($)	**Payee address:**	**City:**	**State:**	**Zip Code**
450.00	6802 Clee Lane, Spring, TX 77379			
PURPOSE OF EXPENDITURE	**Category** (See Categories listed at the top of this schedule)	**Description**		
	Salary/Wages/Contract Labor	Consulting Fees		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	**Candidate / Officeholder name**	**Office sought**		**Office held**

Date	Payee name			
09/19/2024	Mailchimp			
Amount ($)	**Payee address:**	**City:**	**State:**	**Zip Code**
106.60	675 Ponce de Leon NE, Suite 500, Atlanta, GA 30308			
PURPOSE OF EXPENDITURE	**Category** (See Categories listed at the top of this schedule)	**Description**		
	Advertising	Email Services		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY 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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
11	Shelley Sekula-Gibbs	

4 Date	5 Payee name
09/30/2024	Frost

6 Amount ($)	7 Payee address:	City:	State:	Zip Code
5.00	P.O. Box 1315, Houston, TX 77251			

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	Online Banking

(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX. officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
10/01/2024	Word Enthusiast

Amount ($)	Payee address:	City:	State:	Zip Code
2,117.50	67 Panterra Way, The Woodlands, TX 77382			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Salary/Wages/Contract Labor	Consulting Fees

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX. officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
10/01/2024	Google LLC

Amount ($)	Payee address:	City:	State:	Zip Code
7.68	1600 Ampitheatre Pkwy., Mountainview, CA 94043			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Office Overhead	GSuite

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX. officeholder living expense

Complete ONLY 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	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
11	Shelley Sekula-Gibbs	

Expenditure 1

4 Date	5 Payee name	
10/02/2024	NameCheap	
6 Amount ($)	**7 Payee address:**	City; State; Zip Code
11.66	4600 E. Washington St., Ste. 300, Phoenix, AZ 85034	

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)	(b) Description
Advertising	Website

(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name | Office sought | Office held

Expenditure 2

Date	Payee name	
10/21/2024	Mailchimp	
Amount ($)	**Payee address:**	City; State; Zip Code
106.60	675 Ponce de Leon NE, Suite 500, Atlanta, GA 30308	

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
Advertising	Email Services

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name | Office sought | Office held

Expenditure 3

Date	Payee name	
10/31/2024	Frost	
Amount ($)	**Payee address:**	City; State; Zip Code
5.00	P.O. Box 1315, Houston, TX 77251	

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
Fees	Online Banking

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX officeholder living expense

Complete ONLY 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	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
11	Shelley Sekula-Gibbs	

4 Date	5 Payee name
11/02/2024	Google LLC

6 Amount ($)	7 Payee address:	City:	State:	Zip Code
7.68	1600 Amphitheatre Pkwy., Mountainview, CA 94043			

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead	GSuite

(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
11/04/2024	Word Enthusiast

Amount ($)	Payee address:	City:	State:	Zip Code
945.00	67 Panterra Way, The Woodlands, TX 77382			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Salary/Wages/Contract Labor	Consulting Fees

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
11/19/2024	Mailchimp

Amount ($)	Payee address:	City:	State:	Zip Code
106.60	675 Ponce de Leon NE, Suite 500, Atlanta, GA 30308			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising	Email Services

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY 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
Gifts/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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
11	Shelley Sekula-Gibbs	

4 Date	5 Payee name
11/25/2024	NameCheap

6 Amount ($)	7 Payee address; City; State; Zip Code
44.88	4600 E. Washington St., Ste. 300, Phoenix, AZ 85034

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising	Webiste

(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
11/30/2024	Frost

Amount ($)	Payee address; City; State; Zip Code
5.00	P.O. Box 1315, Houston, TX 77251

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Fees	Online Banking

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
12/02/2024	Google LLC

Amount ($)	Payee address; City; State Zip Code
7.68	1600 Ampitheatre Pkwy., Mountainview, CA 94043

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Office Overhead	GSuite

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX. officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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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: 11

2 FILER NAME: Shelley Sekula-Gibbs

3 Filer ID (Ethics Commission Filers):

4 Date: 12/09/2024

5 Payee name: Word Enthusiast

6 Amount ($): 385.00

7 Payee address; City; State; Zip Code: 67 Panterra Way, The Woodlands, TX 7382

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Salary/Wages/Contract Labor

(b) Description: Consulting Fees

(c) Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name; Office sought; Office held

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Date: 12/19/2024

Payee name: Mailchimp

Amount ($): 106.60

Payee address; City; State; Zip Code: 675 Ponce de Leon NE, Suite 500, Atlanta, GA 30308

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Advertising

Description: Email Services

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name; Office sought; Office held

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Date: 12/30/2024

Payee name: Kay Duncan

Amount ($): 93.00

Payee address; City; State; Zip Code: 20206 Rose Dawn Lane

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Salary/Wages/Contract Labor

Description: Consulting Fees

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name; Office sought; Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By Candidates/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:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
11	Shelley Sekula-Gibbs			
4 Date	**5** Payee name			
12/31/2024	Frost			
6 Amount ($)	**7** Payee address:	City:	State:	Zip Code
5.00	P.O. Box 1315, Houston, TX 77251			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
	Fees	Online Banking		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held

Date	Payee name			
Amount ($)	Payee address:	City:	State:	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this 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/OH	Candidate / Officeholder name	Office sought		Office held

Date	Payee name			
Amount ($)	Payee address:	City:	State:	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this 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/OH	Candidate / Officeholder name	Office sought		Office held

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