

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: 32					
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Kathy	MI	OFFICE USE ONLY					
	NICKNAME	LAST Stewart	SUFFIX						
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box: 550881 Dallas TX 75355			Date Received					
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 632 3643								
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr	FIRST Kevin	MI						
	NICKNAME	LAST Hickman	SUFFIX	Date Hand-delivered or Date Postmarked					
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 9474 Gatetrail Dr. Dallas TX 75238			Receipt # Amount \$					
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 549 3873			Date Processed					
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)								
10 PERIOD COVERED	Month Day Year Month Day Year 03 / 28 / 2023 THROUGH 04 / 26 / 2023								
11 ELECTION	<table style="width:100%;"> <tr> <td style="width: 30%;">ELECTION DATE</td> <td style="width: 70%;">ELECTION TYPE</td> </tr> <tr> <td>Month Day Year 05 / 06 / 2023</td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special </td> </tr> </table>					ELECTION DATE	ELECTION TYPE	Month Day Year 05 / 06 / 2023	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
ELECTION DATE	ELECTION TYPE								
Month Day Year 05 / 06 / 2023	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special								
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) Council District 10						
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE 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	COMMITTEE NAME							
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS							
	<input type="checkbox"/> SPECIFIC	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
Kathy Stewart

16 Filer ID (Ethics Commission Filers)

**17 CONTRIBUTION
TOTALS**

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)

\$ 42280.00

**EXPENDITURE
TOTALS**

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$ 0.00

4. **TOTAL POLITICAL EXPENDITURES**

\$ 47500.77

**CONTRIBUTION
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 35766.13

**OUTSTANDING
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 14000.00

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.

ELECTRONICALLY CERTIFIED

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

OR

(2) Unsworn Declaration

My name is Kathy Stewart, and my date of birth is February 20, 1958.

My address is 9509 Shady Valley, Dallas, TX, 75238, USA.
(street) (city) (state) (zip code) (country)

Executed in Dallas County, State of TX, on the 28th day of April, 20 23.
(month) (year)

ELECTRONICALLY CERTIFIED

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME

Kathy Stewart

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 42,280.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input checked="" type="checkbox"/>	SCHEDULE E: LOANS	\$ 4,000.00
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 47,500.77
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

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: 1 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 03/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy Durant <hr/> 6 Contributor address; City; State; Zip Code 10211 Royal Highlands Dallas, TX 75238	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donna Mason <hr/> Contributor address; City; State; Zip Code 9312 Moss Haven Dallas, TX 75231	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pam Brown <hr/> Contributor address; City; State; Zip Code 9927 Windlake Cr Dallas, TX 75238	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bill Underhill <hr/> Contributor address; City; State; Zip Code 9201 Moss Farm Ln Dallas, TX 75243	Amount of contribution (\$) 25.00
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: 2 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynda Martyn <hr/> 6 Contributor address; City; State; Zip Code 9605 Trail Hill Dr Dallas, TX 75238	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jean Bono <hr/> Contributor address; City; State; Zip Code 9222 Arbor Branch Dr Dallas, TX 75243	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arthur Villasana <hr/> Contributor address; City; State; Zip Code 9001 Clayco Dallas, TX 75243	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justin Bono <hr/> Contributor address; City; State; Zip Code 9219 Arbor Trail Dallas, TX 75243	Amount of contribution (\$) 1000.00
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.		

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: 3 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/03/2023	5 Full name of contributor Philip Daily Contributor address; 9701 Burselon Dr City; Dallas, TX 75243 State; Zip Code <input type="checkbox"/> out-of-state PAC (ID#:	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/04/2023	Full name of contributor Paul OConnor Contributor address; 9210 Whitehurst City; Dallas, TX 75243 State; Zip Code <input type="checkbox"/> out-of-state PAC (ID#:	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/06/2023	Full name of contributor Marjorie Gantt Contributor address; 9577 Highedge City; Dallas, TX 75238 State; Zip Code <input type="checkbox"/> out-of-state PAC (ID#:	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/06/2023	Full name of contributor John Carona Contributor address; 5401 N. Central Expy Suite 310 City; Dallas, TX 75205 State; Zip Code <input type="checkbox"/> out-of-state PAC (ID#:	Amount of contribution (\$) 1000.00
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: 4 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rick Perdue <hr/> 6 Contributor address; City; State; Zip Code 7712 Southwestern Blvd Dallas, TX 75225	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melanie Barton <hr/> Contributor address; City; State; Zip Code 7308 Parkshire Ave Dallas, TX 75231	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carole Rylander <hr/> Contributor address; City; State; Zip Code 6873 Blackwood Dr Dallas, TX 75231	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Artt <hr/> Contributor address; City; State; Zip Code 9112 Dusti Dallas, TX 75243	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:
5 of 24

2 FILER NAME

Kathy Stewart

3 Filer ID (Ethics Commission Filers)

4 Date

04/07/2023

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Greg Duval

7 Amount of contribution (\$)

100.00

6 Contributor address;

9218 Loma Vista

City;

Dallas, TX 75243

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/07/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Liz Lang-Miers

Amount of contribution (\$)

100.00

Contributor address;

2200 Ross Avenue

City;

Dallas, TX 75201

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/07/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Elizabeth Mack

Amount of contribution (\$)

50.00

Contributor address;

5343 Livingston Ave

City;

Dallas, TX 75209

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/09/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Shellene

Amount of contribution (\$)

200.00

Contributor address;

9240 Arbor Trail

City;

Dallas, TX 75243

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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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:
6 of 24

2 FILER NAME

Kathy Stewart

3 Filer ID (Ethics Commission Filers)

4 Date

04/09/2023

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Asif Khan

7 Amount of contribution (\$)

25.00

6 Contributor address;

7242 Paldao

City;

Dallas, TX 75240

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/14/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Linda Smith

Amount of contribution (\$)

50.00

Contributor address;

9231 Westpark

City;

Dallas, TX 75231

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/14/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jack Smith

Amount of contribution (\$)

50.00

Contributor address;

9231 Westpark

City;

Dallas, TX 75231

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/14/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Beth Hanks

Amount of contribution (\$)

250.00

Contributor address;

8926 Fenchurch

City;

Dallas, TX 75238

State; Zip Code

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: 7 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ken Hanks <hr/> 6 Contributor address; City; State; Zip Code 8926 Fenchurch Dallas, TX 75238	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apartment Assoc of Greater Dallas <hr/> Contributor address; City; State; Zip Code 5728 LBJ Frwy Suite 100 Dallas, TX 75240	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeri Baker <hr/> Contributor address; City; State; Zip Code 10416 Church Rd Dallas, TX 75238	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Fitzgerald <hr/> Contributor address; City; State; Zip Code 9985 Edgecliff Dallas, TX 75238	Amount of contribution (\$) 25.00
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: 8 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carol Doggett	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 9963 Capridge Dr Dallas, TX 75238		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Doggett	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 9963 Capridge Dr Dallas, TX 75238		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doug Deason	Amount of contribution (\$) 1000.00
Contributor address; City; State; Zip Code 10134 Waller Dr Dallas, TX 75229		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katherine Crow	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 4700 Preston Rd Dallas, TX 75205		
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 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: 9 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/13/2023	5 Full name of contributor Darren Maloney <div><input type="checkbox"/> out-of-state PAC (ID#: _____)</div> <div>Contributor address; City; State; Zip Code 5600 W Lovers Lane Dallas, TX 75209</div>	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/13/2023	Full name of contributor Monica Seeley <div><input type="checkbox"/> out-of-state PAC (ID#: _____)</div> <div>Contributor address; City; State; Zip Code 8430 Stable Glen Dallas, TX 75243</div>	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/15/2023	Full name of contributor John Percy <div><input type="checkbox"/> out-of-state PAC (ID#: _____)</div> <div>Contributor address; City; State; Zip Code 2363 Reagan St Dallas, TX 75219</div>	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/15/2023	Full name of contributor Truitt Matthews <div><input type="checkbox"/> out-of-state PAC (ID#: _____)</div> <div>Contributor address; City; State; Zip Code 9337 Loma Vista Dallas, TX 75243</div>	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: 10 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Morrow <hr/> 6 Contributor address; City; State; Zip Code 6816 Wander Place Dallas, TX 75230	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julie Morrow <hr/> Contributor address; City; State; Zip Code 6816 Wander Place Dallas, TX 75230	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Gruber <hr/> Contributor address; City; State; Zip Code 1918 Olive Street Dallas, TX 75201	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Terry <hr/> Contributor address; City; State; Zip Code 12240 Inwood Road Dallas, TX 75244	Amount of contribution (\$) 1000.00
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.		

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: 11 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy Shores 6 Contributor address; City; State; Zip Code 9606 Robin Song Dallas, TX 75243	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jana Boswell Contributor address; City; State; Zip Code 9406 Winding Ridge Dallas, TX 75238	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robin Norcross Contributor address; City; State; Zip Code 10000 Linkwood Dallas, TX 75238	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Goldstein Contributor address; City; State; Zip Code 10115 Kirkhaven Dallas, TX 75238	Amount of contribution (\$) 250.00
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.		

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: 12 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Watler 6 Contributor address; City; State; Zip Code 5 Twin Bridge Ct. Dallas, TX 75243	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bronwyn Jefferson Contributor address; City; State; Zip Code 10147 Caribou Tr Dallas, TX 75238	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Damon McCall Contributor address; City; State; Zip Code 661 Maple Creek Dr Fairview, TX 75069	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deborah Bono Contributor address; City; State; Zip Code 9219 Arbor Trail Dr Dallas, TX 75243	Amount of contribution (\$) 1000.00
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: 13 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Demetris Sampson <hr/> 6 Contributor address; City; State; Zip Code P.O. Box 763834 Dallas, TX 75376	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brett Blakey <hr/> Contributor address; City; State; Zip Code 4707 Wildwood Rd Dallas, TX 75209	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adam Meierhofer <hr/> Contributor address; City; State; Zip Code 9235 Club Glen Dallas, TX 75243	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darwin Deason <hr/> Contributor address; City; State; Zip Code 3953 Maple Ave Dallas, TX 75219	Amount of contribution (\$) 1000.00
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: 14 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debby Gray <hr/> 6 Contributor address; City; State; Zip Code 7227 Pleasant View Cr Dallas, TX 75231	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virginia Piper <hr/> Contributor address; City; State; Zip Code 9052 Stone Creek Pl Dallas, TX 75243	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Morris <hr/> Contributor address; City; State; Zip Code 9626 Hilldale Dallas, TX 75231	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Wells <hr/> Contributor address; City; State; Zip Code 7238 Mimosa Ln Dallas, TX 75230	Amount of contribution (\$) 250.00
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.		

SCHEDULE A1

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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: 16 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashley Grutzmacher <hr/> 6 Contributor address; City; State; Zip Code 9036 Maguires Bridge Dallas, TX 75231	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe Alcantar <hr/> Contributor address; City; State; Zip Code 7304 Lane Park Ct Dallas, TX 75225	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick Crow <hr/> Contributor address; City; State; Zip Code 4818 North Lindhurst Ave Dallas, TX 75229	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George Crow <hr/> Contributor address; City; State; Zip Code 5526 Monticello Dallas, TX 75206	Amount of contribution (\$) 1000.00
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: 17 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenneth Valach <hr/> 6 Contributor address; City; State; Zip Code 5 Lazee Trl Houston, TX 77024	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trammel Crow <hr/> Contributor address; City; State; Zip Code 4000 Rock Creek Dr Dallas, TX 75204	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harlan Crow <hr/> Contributor address; City; State; Zip Code 3819 Maple Ave Dallas, TX 75219	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Itzel Crow <hr/> Contributor address; City; State; Zip Code 4612 Watauga Dallas, TX 75209	Amount of contribution (\$) 1000.00
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.		

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: 18 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2023	5 Full name of contributor Robert Crow <div><input type="checkbox"/> out-of-state PAC (ID#:_____)</div> <div>6 Contributor address; City; State; Zip Code 4612 Watauga Dallas, TX 75209</div>	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/21/2023	Full name of contributor Stuart Crow <div><input type="checkbox"/> out-of-state PAC (ID#:_____)</div> <div>Contributor address; City; State; Zip Code 6310 Mercedes Ave Dallas, TX 75214</div>	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/21/2023	Full name of contributor Shirley Crow <div><input type="checkbox"/> out-of-state PAC (ID#:_____)</div> <div>Contributor address; City; State; Zip Code 6310 Mercedes Ave Dallas, TX 75214</div>	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/21/2023	Full name of contributor Katherine Crow <div><input type="checkbox"/> out-of-state PAC (ID#:_____)</div> <div>Contributor address; City; State; Zip Code 4700 Preston Rd Dallas, TX 75205</div>	Amount of contribution (\$) 500.00
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: 19 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adam McGill <hr/> 6 Contributor address; City; State; Zip Code 9260 Meadowglen Dallas, TX 75238	7 Amount of contribution (\$) 350.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patricia Heaney <hr/> Contributor address; City; State; Zip Code 8350 San Fernando Way Dallas, TX 75218	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucy Billingsley <hr/> Contributor address; City; State; Zip Code 1722 Routh Street Dallas, TX 75201	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank Mihalopoulos <hr/> Contributor address; City; State; Zip Code 4645 N. Central Expy Dallas, TX 75205	Amount of contribution (\$) 500.00
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: 20 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dallas Police Officers PAC <hr/> 6 Contributor address; City; State; Zip Code 1412 Griffin St. East Dallas, TX 75215	7 Amount of contribution (\$) 2500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Real Estate Council PAC <hr/> Contributor address; City; State; Zip Code 3100 McKinnon St Suite 1150 Dallas, TX 75201	Amount of contribution (\$) 2500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREPAC Texas Assoc of Realtors PAC <hr/> Contributor address; City; State; Zip Code P.O. Box 2246 Austin, TX 78768	Amount of contribution (\$) 2500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laura Woodall <hr/> Contributor address; City; State; Zip Code 4303 W Lovers Lane Dallas, TX 75209	Amount of contribution (\$) 250.00
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: 21 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janice Barger	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 8630 Middle Downs Dr. Dallas, TX 75243		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Levy	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 5 Vista Lane Glen Head, NY 11545		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cynthia Silverthorn	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 2415 Grandview Dr Richardson, TX 75080		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Mundinger	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 3413 Southwestern Dallas, TX 75225		
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: 22 of 24
2 FILER NAME Kathy Stewart		3 Filer ID (Ethics Commission Filers)
4 Date 04/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin Bryant	7 Amount of contribution (\$) 150.00
6 Contributor address; City; State; Zip Code 4100 Brookview Dr Dallas, TX 75220		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodney Whitley	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 181 Yorkshire Dr Heath, TX 75032		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephen Bancroft	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 25698 Middleton Dr Frisco, TX 75033		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley Millikin	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 3412 Harvard Ave Dallas, TX 75205		
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 A1

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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:
24 of 24

2 FILER NAME

Kathy Stewart

3 Filer ID (Ethics Commission Filers)

4 Date

04/26/2023

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Richard Chesney

7 Amount of contribution (\$)

1000.00

6 Contributor address;

6225 McCommas Blvd

City;

Dallas, TX 75214

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/26/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Syd Gillon

Amount of contribution (\$)

1000.00

Contributor address;

3910 Gillon Ave

City;

Dallas, TX 75205

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/26/2023

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris Heinbaugh

Amount of contribution (\$)

100.00

Contributor address;

1801 Annex Ave Suite 507

City;

Dallas, TX 75204

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City;

State; Zip Code

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.

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 of 1	
2 FILER NAME Kathy Stewart				3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED LOANS				\$ 0	
5 Date of loan 04/06/2023		7 Name of lender Kathy Stewart <input type="checkbox"/> out-of-state PAC (ID#: _____)		9 Loan Amount (\$) 4000.00	
6 Is lender a financial Institution? Y <input checked="" type="radio"/> N <input type="radio"/>		8 Lender address; City; State; Zip Code 9509 Shady Valley Dr. Dallas, TX 75238		10 Interest rate 0.0%	
				11 Maturity date 01/01/2024	
12 Principal occupation / Job title (See Instructions)			13 Employer (See Instructions)		
14 Description of Collateral <input checked="" type="checkbox"/> none			15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)		
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable		17 Name of guarantor		19 Amount Guaranteed (\$) 0.00	
		18 Guarantor address; City; State; Zip Code			
20 Principal Occupation (See Instructions)			21 Employer (See Instructions)		
Date of loan		Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)		Loan Amount (\$)	
Is lender a financial Institution? Y <input type="radio"/> N <input type="radio"/>		Lender address; City; State; Zip Code		Interest rate	
				Maturity date	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Description of Collateral <input type="checkbox"/> none			<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)		
GUARANTOR INFORMATION <input type="checkbox"/> not applicable		Name of guarantor		Amount Guaranteed (\$)	
		Guarantor address; City; State; Zip Code			
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: 1 of 4	2 FILER NAME Kathy Stewart	3 Filer ID (Ethics Commission Filers)
4 Date 03/30/2023	5 Payee name Murphy Nasica	
6 Amount (\$) 1000.00	7 Payee address; City; State; Zip Code 919 Congress Ave Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Political Consulting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 04/07/2023	Payee name Murphy Nasica	
Amount (\$) 6596.01	Payee address; City; State; Zip Code 919 Congress Ave Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Mailer design, printing & postage
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 04/07/2023	Payee name Clayton Henry	
Amount (\$) 2000.00	Payee address; City; State; Zip Code 9109 Moss Trail Dallas, TX 75231	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Political Consulting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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

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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: 2 of 4	2 FILER NAME Kathy Stewart	3 Filer ID (Ethics Commission Filers)
4 Date 04/12/2023	5 Payee name Murphy Nasica	
6 Amount (\$) 6500.00	7 Payee address; City; State; Zip Code 919 Congress Ave Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Digital Advertising
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 04/12/2023	Payee name Murphy Nasica	
Amount (\$) 5000.00	Payee address; City; State; Zip Code 919 Congress Ave Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Political Consulting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 04/06/2023	Payee name Graphics Management	
Amount (\$) 4088.39	Payee address; City; State; Zip Code 9109 Moss Haven Dallas, TX 75231	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Campaign Materials
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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: 3 of 4	2 FILER NAME Kathy Stewart	3 Filer ID (Ethics Commission Filers)
4 Date 04/26/2023	5 Payee name Anedot	
6 Amount (\$) 764.00	7 Payee address; City; State; Zip Code 1340 Poydras St New Orleans, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Digital Fundraising Expense
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 04/21/2023	Payee name Graphics Management	
Amount (\$) 10923.53	Payee address; City; State; Zip Code 9109 Moss Trail Dallas, TX 75231	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Campaign materials
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 04/21/2023	Payee name Bodell Communications	
Amount (\$) 1400.00	Payee address; City; State; Zip Code 9611 Faircrest Dallas, TX 75238	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Communications
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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: 4 of 4	2 FILER NAME Kathy Stewart	3 Filer ID (Ethics Commission Filers)
4 Date 04/26/2023	5 Payee name Murphy Nasica	
6 Amount (\$) 9228.84	7 Payee address; City; State; Zip Code 919 Congress Ave Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Mailer design, printing & postage
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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