

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

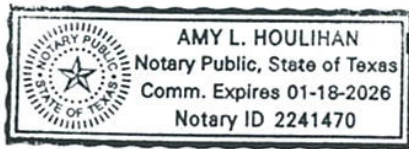
FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Laura Durant 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)	\$ ϕ
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7197.91
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ ϕ
	4. TOTAL POLITICAL EXPENDITURES	\$ 4317.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2548.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2000.00

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.

Laura Durant
Signature of Candidate or Officeholder



Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Laura Duran this the 7 day of April

20 22, to certify which, witness my hand and seal of office.

Amy Houlihan Amy Houlihan Notary Public
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____

My address is _____
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Laura Durant</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6805
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 332.91
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 2000
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 4317.
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Laura Durant		3 Filer ID (Ethics Commission Filers)
4 Date 2/25/22	5 Full name of contributor out-of-state PAC (ID#: _____) Andrea Curreri	7 Amount of contribution (\$) 125.00
	6 Contributor address; City; State; Zip Code 307 Timberlake Dr. Southlake, Tx 76092	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 2/26/22	Full name of contributor out-of-state PAC (ID#: _____) August Schilling	Amount of contribution (\$) 200.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/2/22	Full name of contributor out-of-state PAC (ID#: _____) Paula Edens	Amount of contribution (\$) 150.00
	Contributor address; City; State; Zip Code 913 Summertree Southlake, Tx 76012	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 3/3/22	Full name of contributor out-of-state PAC (ID#: _____) Michael Crane	Amount of contribution (\$) 50.00
	Contributor address; City; State; Zip Code 4109 E. 10th Ave #446 Denver CO 80220	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Accenture

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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Laura Durant		3 Filer ID (Ethics Commission Filers)
4 Date 3/4/22	5 Full name of contributor out-of-state PAC (ID#: _____) Bonnie & Kevin Henry	7 Amount of contribution (\$) 275.00
	6 Contributor address; City; State; Zip Code 5205 Windstone Dr. Keller TX 76244	
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Classic
Date 3/4/22	Full name of contributor out-of-state PAC (ID#: _____) Aimee Martin	Amount of contribution (\$) 200.00
	Contributor address; City; State; Zip Code 715 Windsor Creek Southlake Tx 76092	
Principal occupation / Job title (See Instructions) Banking		Employer (See Instructions) Independent Financial
Date 3/5/22	Full name of contributor out-of-state PAC (ID#: _____) Jennifer Golomb	Amount of contribution (\$) 100
	Contributor address; City; State; Zip Code 2837 Placid Circle South Grapevine TX 76051	
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Sodexo
Date 3/6/22	Full name of contributor out-of-state PAC (ID#: _____) Charla Thompson	Amount of contribution (\$) 80.00
	Contributor address; City; State; Zip Code 108 Wilmington Ct. Southlake TX 76092	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) none

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Laura Durant		3 Filer ID (Ethics Commission Filers)
4 Date 3/6/22	5 Full name of contributor out-of-state PAC (ID#: _____) Lisa Williams	7 Amount of contribution (\$) 50.00
	6 Contributor address; City; State; Zip Code 1915 Shooting Star Ln. Southlake Tx 76092	
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions) CISD
Date 3/7/22	Full name of contributor out-of-state PAC (ID#: _____) Bjorn Bennett	Amount of contribution (\$) 250.00
	Contributor address; City; State; Zip Code 724 Longford Dr. Southlake Tx 76092	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Epig Global
Date 3/7/22	Full name of contributor out-of-state PAC (ID#: _____) Kristin Lambeth	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 210 Silverwood Cir. Southlake Tx 76092	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) none
Date 3/8/22	Full name of contributor out-of-state PAC (ID#: _____) Angela Jones	Amount of contribution (\$) 50.00
	Contributor address; City; State; Zip Code 903 Parkview Ln Southlake Tx 76092	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) none

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Laura Durant		3 Filer ID (Ethics Commission Filers)
4 Date 3/18/22	5 Full name of contributor out-of-state PAC (ID#: _____) Kimberly Manskey	7 Amount of contribution (\$) 100.00
	6 Contributor address; City: State: Zip Code 350 Central Ave # 308 Southlake Tx 76092	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 3/22/22	Full name of contributor out-of-state PAC (ID#: _____) Pamela Francis	Amount of contribution (\$) 100.00
	Contributor address; City: State: Zip Code 1203 Champions Way Southlake Tx 76092	
Principal occupation / Job title (See Instructions) Strategy, Risk & Compliance Specialist		Employer (See Instructions) PWC
Date 3/24/22	Full name of contributor out-of-state PAC (ID#: _____) Holly Walsh	Amount of contribution (\$) 200.00
	Contributor address; City: State: Zip Code 1002 Hanover Dr. Southlake Tx 76092	
Principal occupation / Job title (See Instructions) Flight Attendant		Employer (See Instructions) Delta
Date 3/29/22	Full name of contributor out-of-state PAC (ID#: _____) Emily Setford	Amount of contribution (\$) 50.00
	Contributor address; City: State: Zip Code 1911 Water Lily Dr. Southlake Tx 76092	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) CISD
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Laura Durant		3 Filer ID (Ethics Commission Filers)
4 Date 3/30/22	5 Full name of contributor out-of-state PAC (ID#: _____) Terri Bartlett	7 Amount of contribution (\$) 40.00
	6 Contributor address; City; State; Zip Code 808 Longford Dr. Southlake Tx 76092	
8 Principal occupation / Job title (See Instructions) fitness instructor		9 Employer (See Instructions) self
Date 4/4/22	Full name of contributor out-of-state PAC (ID#: _____) Teresa Kullupka	Amount of contribution (\$) 50.00
	Contributor address; City; State; Zip Code 722 Portofino Pl Southlake Tx 76092	
Principal occupation / Job title (See Instructions) Digital Marketing		Employer (See Instructions) MRC
Date 4/4/22	Full name of contributor out-of-state PAC (ID#: _____) Kathy Hines	Amount of contribution (\$) 50.00
	Contributor address; City; State; Zip Code 1000 Pheasant Ln Southlake Tx 76092	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) none
Date 4/5/22	Full name of contributor out-of-state PAC (ID#: _____) Hilary Prokop	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 1205 Champions Way Southlake Tx 76092	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) none

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Laura Durant		3 Filer ID (Ethics Commission Filers)
4 Date 4/5/22	5 Full name of contributor out-of-state PAC (ID#: _____) Katie Zeback	7 Amount of contribution (\$) 25.00
	6 Contributor address; City; State; Zip Code 9709 Keywest Ave. Southlake Tx 76092	
8 Principal occupation / Job title (See Instructions) AI Researcher		9 Employer (See Instructions) Johns Hopkins
Date 4/5/22	Full name of contributor out-of-state PAC (ID#: _____) Gordon Aalund	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 200 E. Chapel Downs Dr. Southlake, Tx 76092	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) IES
Date 2/26/22	Full name of contributor out-of-state PAC (ID#: _____) Paulette Turner	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code P.O. Box 843 Colleyville, Tx	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/21/22	Full name of contributor out-of-state PAC (ID#: _____) Zoe Courtney	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 912 Raven Court Southlake Tx 76092	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Laura Durant		3 Filer ID (Ethics Commission Filers)
4 Date 2/21/22	5 Full name of contributor out-of-state PAC (ID#: _____) Jennifer Schutter	7 Amount of contribution (\$) 500.00
	6 Contributor address; City; State; Zip Code 2001 Vail Rd Southlake Tx 76092	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/20/22	Full name of contributor out-of-state PAC (ID#: _____) Philip Petesca	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 141 Eagle Pass Georgetown Tx 76052	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/20/22	Full name of contributor out-of-state PAC (ID#: _____) Kerin Beauchamp	Amount of contribution (\$) 250.00
	Contributor address; City; State; Zip Code 655 N. Park Blvd. Grapevine Tx 76051	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/19/22	Full name of contributor out-of-state PAC (ID#: _____) Donna James-Harvey	Amount of contribution (\$) 100
	Contributor address; City; State; Zip Code 12884 Noel Rd #1081 Dallas Tx 75230	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Laura Durant		3 Filer ID (Ethics Commission Filers)
4 Date 2/18/22	5 Full name of contributor out-of-state PAC (ID#: _____) Richard Durant	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 1507 Meeting Street Southlake Tx 76092		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/18/22	Full name of contributor out-of-state PAC (ID#: _____) Tom Durant	Amount of contribution (\$) \$ 2000
Contributor address; City; State; Zip Code 1500 Meeting St. Southlake, Tx 76092		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/18/22	Full name of contributor out-of-state PAC (ID#: _____) Nancy Novak	Amount of contribution (\$) 10.00
Contributor address; City; State; Zip Code 5109 Merced Dr. Ft Worth, Tx 76137		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/16/22	Full name of contributor out-of-state PAC (ID#: _____) Beverly Bright	Amount of contribution (\$) 100
Contributor address; City; State; Zip Code 1211 Williamson Rd. Granbury Tx 76048		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Laura Durant		3 Filer ID (Ethics Commission Filers)
4 Date 2/16/22	5 Full name of contributor out-of-state PAC (ID#: _____) Laura Durant	7 Amount of contribution (\$) 5.00
	6 Contributor address; City; State; Zip Code 1920 Country Moss Way Southlake, Tx 76092	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/16/22	Full name of contributor out-of-state PAC (ID#: _____) Laura Durant	Amount of contribution (\$) 5.00
	Contributor address; City; State; Zip Code 1920 Country Moss Way Southlake, Tx 76092	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/16/22	Full name of contributor out-of-state PAC (ID#: _____) Nithya Vasan	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 809 Orleans Dr. Southlake Tx 76092	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/16/22	Full name of contributor out-of-state PAC (ID#: _____) Tara Johnson	Amount of contribution (\$) 150
	Contributor address; City; State; Zip Code 404 Orleans Dr. Southlake Tx 76092	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Laura Durant		3 Filer ID (Ethics Commission Filers)
4 Date 2/16/22	5 Full name of contributor out-of-state PAC (ID#: _____) Erin Ingram	7 Amount of contribution (\$) 100.00
	6 Contributor address; City; State; Zip Code 809 Kelberg Ct. Southlake Tx 76092	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/15/22	Full name of contributor out-of-state PAC (ID#: _____) Jennifer Godette	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 116 Sweet St. Southlake Tx 76092	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/15/22	Full name of contributor out-of-state PAC (ID#: _____) Beatriz Terrazas	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 4322 Homestead Dr. Southlake Tx 76092	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/15/22	Full name of contributor out-of-state PAC (ID#: _____) Elisha Furka	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 803 Dominion Dr. Southlake Tx 76092	
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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <u>1</u>	
2 FILER NAME <u>Laura Durant</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <u>2/22/22</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Elisha Kurka</u>	8 Amount of Contribution \$ <u>84.25</u>	9 In-kind contribution description <u>buttons</u>
7 Contributor address; City; State; Zip Code <u>803 Dominion Dr. Southlake Tx 76092</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <u>Homemaker</u>		11 Employer (FOR NON-JUDICIAL)(See Instructions) <u>none</u>	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date <u>3/22/22</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Paula Edens</u>	Amount of Contribution \$ <u>248.63</u>	In-kind contribution description <u>Flyers</u>
Contributor address; City; State; Zip Code <u>913 Summer Tree Ln. Southlake Tx 76092</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <u>Retired</u>		Employer (FOR NON-JUDICIAL)(See Instructions) <u>none</u>	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

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: <u>1</u>
2 FILER NAME <u>Laura Durant</u>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan <u>2/15/22</u>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) <u>Laura Durant</u>	9 Loan Amount (\$) <u>2000.00</u>
6 Is lender a financial Institution? Y <input checked="" type="radio"/> N <input type="radio"/>	8 Lender address; City; State; Zip Code <u>1920 Country Moss Way Southlake, Tx 76092</u>	10 Interest rate
		11 Maturity date
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 (\$)
	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 N	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)

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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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3	2 FILER NAME Laura Durant	3 Filer ID (Ethics Commission Filers)
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4 Date 2/24/22	5 Payee name Summit Printing
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6 Amount (\$) 956.80	7 Payee address; 800 E. 101 Ter, Ste 350	City; Kansas City, MO	State; MO	Zip Code 64131
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Signs and fliers
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/24/22	Payee name Just Yard signs
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Amount (\$) 1385.00	Payee address; 2235 Mercator Dr.	City; Orlando	State; FL	Zip Code 32807
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Yard signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 2/24/22	Payee name Dei Uprinting
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Amount (\$) 430.77	Payee address; 8000 Haskell Ave	City; Van Nuys	State; CA	Zip Code 91406
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Car magnets
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3	2 FILER NAME Laura Durant	3 Filer ID (Ethics Commission Filers)
4 Date 2/25/22	5 Payee name Staples	
6 Amount (\$) 129.89	7 Payee address; City; State; Zip Code 200 Kimball Ave. St. 221 Southlake TX 76092	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description flyers
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/25/22	Payee name Vista Print	
Amount (\$) 71.22	Payee address; City; State; Zip Code 100 Hayden Ave. Lexington MA 02421	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Cards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/25/22	Payee name Tshirt Creations	
Amount (\$) 974.25	Payee address; City; State; Zip Code 1225 E. Crosby Rd. Ste A1 Carrollton TX 75006	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing expense	Description Tshirts
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>3</u>	2 FILER NAME <u>Laura Durant</u>	3 Filer ID (Ethics Commission Filers)
4 Date <u>2/28/22</u>	5 Payee name <u>Signarama</u>	
6 Amount (\$) <u>166.61</u>	7 Payee address; City; State; Zip Code <u>151 S Dooley St. #101 Grapevine Tx 76051</u>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Printing Expense</u>	(b) Description <u>Sign</u>
	(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 <u>2/16/22</u>	Payee name <u>Staples</u>	
Amount (\$) <u>112.57</u>	Payee address; City; State; Zip Code <u>200 Kimball Ave # 221 Southlake Tx 76092</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Printing Expense</u>	Description <u>Flyers</u>
	<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 <u>3/18/22</u>	Payee name <u>Graduate Coffee</u>	
Amount (\$) <u>89.90</u>	Payee address; City; State; Zip Code <u>1901 W. Southlake Blvd #100 Southlake Tx 76092</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Food/Beverage Expense</u>	Description <u>Meet & Greet food</u>
	<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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