

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <span style="font-size: 2em; margin-left: 20px;">12</span>	
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR <span style="font-size: 1.5em;">O</span>	FIRST <span style="font-size: 1.5em;">Craig</span>	MI <span style="font-size: 1.5em;">W</span>	
	NICKNAME	LAST <span style="font-size: 1.5em;">Tipping</span>	SUFFIX	
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			
	<span style="font-size: 1.2em;">1021 Pebble Beach Dr. Mansfield, TX 76063</span>			
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION	
	<span style="font-size: 1.2em;">(682)</span>	<span style="font-size: 1.2em;">472-2276</span>		
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR <span style="font-size: 1.5em;">O</span>	FIRST <span style="font-size: 1.5em;">Stacie</span>	MI	
	NICKNAME	LAST <span style="font-size: 1.5em;">Bertin</span>	SUFFIX	
<b>7 CAMPAIGN TREASURER ADDRESS</b> <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE			
	<span style="font-size: 1.2em;">1202 Williamsburg Road Mansfield, TX 76063</span>			
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION	
	<span style="font-size: 1.2em;">(940)</span>	<span style="font-size: 1.2em;">735-2761</span>		
<b>9 REPORT TYPE</b>	<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)			
<b>10 PERIOD COVERED</b>	Month    Day    Year	THROUGH	Month    Day    Year	
	<span style="font-size: 1.2em;">03 / 29 / 2022</span>		<span style="font-size: 1.2em;">04 / 27 / 2022</span>	
<b>11 ELECTION</b>	ELECTION DATE	ELECTION TYPE		
	Month    Day    Year <span style="font-size: 1.2em;">05 / 07 / 2022</span>	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
<b>12 OFFICE</b>	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)		
	—	<span style="font-size: 1.2em;">MISD School Board Trustee - Place 3</span>		
<b>14 NOTICE FROM POLITICAL COMMITTEE(S)</b>	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.			
	<input type="checkbox"/> Additional Pages  <input checked="" type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME	
			<span style="font-size: 1.2em;">DFW Conservative Voters PAC</span>	
			COMMITTEE ADDRESS	
			<span style="font-size: 1.2em;">P.O. Box 173065 Arlington, TX 76003</span>	
	COMMITTEE CAMPAIGN TREASURER NAME			
	<span style="font-size: 1.2em;">Stuart Lane</span>			
	COMMITTEE CAMPAIGN TREASURER ADDRESS			

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

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

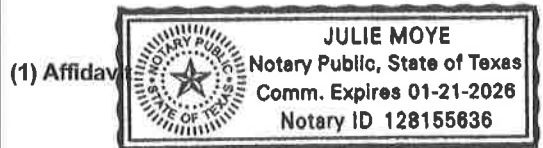
**15 C/OH NAME** Craig Tipping **16 Filer ID (Ethics Commission Filers)**

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,928. <sup>21</sup>
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,747. <sup>70</sup>
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 732. <sup>59</sup>
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

**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.

Cy Tipping  
Signature of Candidate or Officeholder

**Please complete either option below:**



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Craig Tipping this the 29<sup>th</sup> day of April, 2022, to certify which, witness my hand and seal of office.

Julie Moye Julie Moye Coordinator of Board Services  
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>Craig Tipping</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTAL & NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,100. <sup>00</sup>
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,828. <sup>21</sup>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2,747. <sup>76</sup>
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: <b>3</b>
2 FILER NAME <b>Craig Tipping</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/30/22</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Shannon Williams</b>	7 Amount of contribution (\$) <b>50.00</b>
	6 Contributor address; City; State; Zip Code <b>8 Par Ct. Mansfield, Tx 76063</b>	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <b>3/31/22</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Gene-Marie Sporduti</b>	Amount of contribution (\$) <b>250.00</b>
	Contributor address; City; State; Zip Code <b>1 Inverness Ct. Mansfield, Tx 76063</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>4/3/22</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kevin Orsak</b>	Amount of contribution (\$) <b>200.00</b>
	Contributor address; City; State; Zip Code <b>1102 Country Club Ct. Mansfield, TX 76063</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>4/6/22</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jane Shipp</b>	Amount of contribution (\$) <b>25.00</b>
	Contributor address; City; State; Zip Code <b>203 Spring Creek Dr. Waxahachie, TX 75165</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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**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: <b>3</b>
2 FILER NAME <b>Craig Tipping</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/10/22</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Samantha Pettit</b>	7 Amount of contribution (\$) <b>50.00</b>
6 Contributor address; City; State; Zip Code <b>2503 Thoroughbred Ln. Mansfield, TX 76063</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>4/12/22</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Brad Bynum</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>4255 Burtleson Rott Rd. Burtleson, TX 76028</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>4/13/22</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Laura Hicks</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>2416 Bent Trl. Mansfield, TX 76063</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>4/14/22</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ashley Hanson</b>	Amount of contribution (\$) <b>10.00</b>
Contributor address; City; State; Zip Code <b>1313 Highland Dr. Mansfield, TX 76063</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p><b>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</b></p>		

# 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:

3

2 FILER NAME

Craig Tipping

3 Filer ID (Ethics Commission Filers)

4 Date

4/15/22

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Brenda Hayes

7 Amount of contribution (\$)

50.00

6 Contributor address; City; State; Zip Code

1301 E. Debbie Ln. Suite 102 #43 Mansfield, TX 76063

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/19/22

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Brandon Bolton

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

3135 Honey Tree Ln. Austin, TX 78746

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/27/22

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Sandy Pettit

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

2503 Thoroughbred Ln. Mansfield, TX 76063

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/12/22

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Sve Ward

Amount of contribution (\$)

40.00

Contributor address; City; State; Zip Code

Mansfield, TX 76063

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.

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: <u>1</u>	
2 FILER NAME <u>Craig Tipping</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <u>4/27/22</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Manstfield 1st PAC</u>	8 Amount of Contribution \$ <u>1828.21</u>	9 In-kind contribution description <u>mailers/post cards</u> <u>campaign app</u>
7 Contributor address; City; State; Zip Code <u>2601 E. Broad St. Mansfield, TX 76063</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
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	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
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)			
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor 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.

<b>1</b> Total pages Schedule F1: 5	<b>2</b> FILER NAME Craig Tipping	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 4/1/22	<b>5</b> Payee name Staples	
<b>6</b> Amount (\$) 27. <sup>05</sup>	<b>7</b> Payee address; City; State; Zip Code 1781 US Highway 287 Mansfield, TX 76063	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising expense	<b>(b)</b> Description Business cards
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 4/1/22	Payee name Edgerton Strategies	
Amount (\$) 946.11	Payee address; City; State; Zip Code 1540 Keller-Parkway #108-402 Keller, Tx 76248	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Yard signs / Large signs
	<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 4/4/22	Payee name Staples	
Amount (\$) 20. <sup>10</sup>	Payee address; City; State; Zip Code 1781 US Highway 287 Mansfield, TX 76063	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising expense	Description Fliers
	<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  | 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.

<b>1</b> Total pages Schedule F1: 5	<b>2</b> FILER NAME Craig Tipping	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 4/6/22	<b>5</b> Payee name McHayes Inc. dba Tarrant Campaign Services	
<b>6</b> Amount (\$) 815.93	<b>7</b> Payee address 1510 Valleywood Trl. Mansfield, TX 76063 City; State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising expense	<b>(b)</b> Description Sign placement/management
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 4/7/22	Payee name PrintPlace, Digital Room Inc.	
Amount (\$) 189.49	Payee address; 1110 Avenue H East Arlington, TX 76011 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising expense	Description Push cards
	<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 4/12/22	Payee name Walmart Supercenter	
Amount (\$) 65.20	Payee address; 930 N Walnut Creek Dr. ste 800 Mansfield, TX 76063 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event expense	Description Food/drink
	<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.

<b>1</b> Total pages Schedule F1: <i>5</i>	<b>2</b> FILER NAME <i>Craig Tipping</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>4/12/22</i>	<b>5</b> Payee name <i>Sam's Club</i>	
<b>6</b> Amount (\$) <i>89.07</i>	<b>7</b> Payee address; City; State; Zip Code <i>1740 FM 157 Mansfield, TX 76063</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Event expense</i>	<b>(b)</b> Description <i>Food/drink</i>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <i>4/13/22</i>	Payee name <i>Edgerton Strategies</i>	
Amount (\$) <i>443.05</i>	Payee address; City; State; Zip Code <i>1540 Keller Parkway #108-402 Keller, TX 76248</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Advertising expense</i>	Description <i>Yard signs</i>
	<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 <i>4/20/22</i>	Payee name <i>Kroger Fuel Center</i>	
Amount (\$) <i>59.00</i>	Payee address; City; State; Zip Code <i>3300 E. Broad St. Mansfield, TX 76063</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Travel in district</i>	Description <i>Gas</i>
	<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  | 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.

<b>1</b> Total pages Schedule F1: <i>5</i>	<b>2</b> FILER NAME <i>Craig Tipping</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>4/21/22</i>	<b>5</b> Payee name <i>Market Street</i>	
<b>6</b> Amount (\$) <i>20.77</i>	<b>7</b> Payee address; City; State; Zip Code <i>3145 E Broad St Mansfield, TX 76063</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Food/Beverage expense</i>	<b>(b)</b> Description <i>Meal</i>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>Date</b> <i>4/25/22</i>	<b>Payee name</b> <i>McDonald's</i>	
<b>Amount (\$)</b> <i>4.33</i>	<b>Payee address; City; State; Zip Code</b> <i>1001 US 287 Frantage Rd. Mansfield, TX 76063</i>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <i>Food/Beverage expense</i>	<b>Description</b> <i>Meal</i>
	<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
<b>Date</b> <i>4/25/22</i>	<b>Payee name</b> <i>Murphy USA</i>	
<b>Amount (\$)</b> <i>53.26</i>	<b>Payee address; City; State; Zip Code</b> <i>950 N. Walnut Creek Dr. Mansfield, TX 76063</i>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <i>Travel in district</i>	<b>Description</b> <i>Gas</i>
	<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	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.

<b>1</b> Total pages Schedule F1: <i>5</i>	<b>2</b> FILER NAME <i>Craig Tipping</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>4/27/22</i>	<b>5</b> Payee name <i>Anedot Inc.</i>	
<b>6</b> Amount (\$) <i>14.40</i>	<b>7</b> Payee address; City; State; Zip Code <i>1340 Poydras Street, suite 1770 New Orleans, LA 70112</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Fees</i>	<b>(b)</b> Description <i>Electronic contribution fees</i>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> 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	
<b>PURPOSE OF EXPENDITURE</b>	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	
<b>PURPOSE OF EXPENDITURE</b>	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

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