

CANDIDATE / OFFICEHOLDER C A P A G F I A C E R E P O R T

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:

23

3 CANDIDATE /
OFFICEHOLDER
NAME

MR

FIRST

Rachel

MI

L

OFFICE USE ONLY

NICKNAME

LAST

Elliott

SUFFIX

Date Received

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

5825 Vineyard Lane
McKinney, Texas 75070



4 via

Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

Date Hand-delivered or Date Postmarked

(940)

367-4540

6 CAMPAIGN

ADDRESS

Receipt #

Amount

NICKNAME

LAST

Klein

SUFFIX

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

800 S. Ballantrae Drive

CA D DATE / OFFICE OLDER
CA PAIG F A CE REPORT

FORM C/OH
COVER SHEET PG 2

16 C/OH NAME

Rachel L Elliott

16 Filer ID (Ethics Commission Filers)

TOTAL POLITICAL CONTRIBUTIONS

(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

\$ 10,438.77

\$ 6,354.69

\$

TOTALS

PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR
CONTRIBUTIONS MADE ELECTRONICALLY)

Signature of Candidate or Officeholder

2.

EXPENDITURE
TOTALS

3.

TOTAL UNITEMIZED POLITICAL EXPENDITURE

Please complete either option below:

CONTRIBUTION

BALANCE

5

TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY

August 18, 1983

My name is

Rachel L. Elliott
5 Vineyard La

McKinney

OUTSTANDING
LOAN TOTALS

6

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

23,800.97

18 SIGNATURE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Rachel L. Elliott

SCHEDULE SUBTOTALS

SUBTOTAL

NAME OF SCHEDULE

AMOUNT

SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS

3

4. SCHEDULE E: LOANS \$ 8,348.38

2 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 25,277.57

6 SCHEDULE B: PLEDGED CONTRIBUTIONS \$

\$ 19,060.80

8. SCHEDULE E4: EXPENDITURES MADE BY CREDIT CARD POLITICAL CONTRIBUTIONS \$

10. \$

SCHEDULE F2: UNPAID INCURRED OBLIGATIONS

7 SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

11 SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

12.

MONEY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

Christy White

\$100-

3/30/23

Contributor address:
701 Addie Ln.
McKinney, TX 75071

\$50-

RR5

out-of-state PAC (I) Amount of contribution (\$)

4/2/23

Ret. Fix

\$25-

Retired

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

Winston Jones

4/7/23

real

\$25

Retired

out-of-state PAC (ID#: _____)

Pat Jones

Contributor address; TX 75022

2700 Piersall Drive

Rachel L. Elliott

\$25

4 Date

5 Full name of contributor

out-of-state PAC

7 Amount of contribution (\$)

Retired

6 Contributor address;

City;

State;

Zip Code

\$50

8 Principal occupation / Job title (See

9 Employer (See Instructions)

Date

Full name of contributor

Amount of contribution (\$)

4/7/23

City;

State;

Zip Code

Principal occupation / Job title (See

Employer (See Instructions)

Full name of contributor

Amount of contribution (\$)

Jan Dean

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Sales

Date

Full name of contributor

Amount of contribution (\$)

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

3 Filer ID (Ethics Commission Filers)

2 FILER NAME

Rachel L. Elliott

out-of-state PAC

4 Date

5 Patrick Wamhoff
Full name of contributor

7 Amount of contribution (\$)

6 Contributor

\$129.38

Acct. Executive

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Uni

Date

Full name of contributor

Amount of contribution (\$)

Fred Moses

State: Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

I LLC

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Innpati Mary ce

4 man

teacher

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

Rachel L. Elliott,

4/23/23

Vineyard
n

Teacher

4/23/23

18 D a mary Dr
Retired

4/24

out-of-state PAC (ID#: _____)

n

75070

\$40.-

Retired

1 Total pages Schedule A1:

7

3 Filer ID (Ethics Commission Filers)

2 FILER NAME

Mary Magnuson

4/26/23

Contributor address: City: State:

4 Date

5 Full name of contributor: Vineyard Lane (ID#: _____)

7 Amount of contribution (\$)

\$30.-

Mary Magnuson

6 Contributor address: City: State: Zip Code:

\$5.-

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

2 Filer ID (Elections Committee File #)

2 FILER NAME

Rachel L. Elliott

4/25/23

DeLeon English

Contributor address: 1441 Th Hill Lane, Li e m

\$250.00

4 Date

Consultant

Full name of contributor

out-of-state PAC (ID#)

7 Amount of contribution (\$)

Address

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Applehead LLC

out-of-state PAC (ID#)

out-of-state PAC (ID#)

Contributor address;

City;

State; Zip Code

Principal occupation / Job title

Instructions)

Employer (See Instructions)

Date

Full name of contributor

Amount of contribution (\$)

Contributor address;

City;

State; Zip Code

Principal occupation / Job title

Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

2 FILER NAME

Rachel L. Elliott

Contributor address:

4 Willow Stone Rd.
Colorado Springs, CO 80900

Amounts for

14 Contributor's employer/law firm (FOR JUDICIAL)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

3

3 Filer ID (Ethics Commission Filers)

Contributor's employer/law firm (FOR JUDICIAL)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

1,950.39

5 Date

6 Full name of contributor

out-of-state PAC (ID#: _____)

Theodore Elliott

8 Amount of Contribution \$

9 In-kind contribution description

\$800

State; Zip Code

Check if travel outside of Texas. Complete Schedule T

10 Filer's employer/law firm (FOR NON-JUDICIAL) (See Instructions) 11 Employer (FOR NON-JUDICIAL) (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

1 Total Line on Schedule A2

5 Date

6 Full name of contributor out-of-state PAC (ID#: _____)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ \$1950.39

24 0 1 T ...

8 Amount of Contribution \$ 9 In-kind contribution description

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:

2 FILER NAME

RACHEL L. ELLIOTT

3 Filer ID (Ethics Commission Filers)

Date

7 Contributor address;

State;

Check if box of outside of Texas Contribution

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

out-of-state PAC (ID#)

Amount of Contribution \$

In-kind contribution description

Contributor address;

State; Zip Code

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's membership of (FOR JUDICIAL)

6 Full name of contributor

out-of-state PAC (ID#)

8 Amount of Contribution \$

9 In-kind contribution description

COLLIN COUNTY PATRIOTS



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
3

2 FILER NAME

Rachel L. Elliott

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 19060.80

5 Date of loan

4/5/23

7 Name of lender

Rachel L. Elliott

out-of-state PAC (ID#: _____)

9 Loan Amount (\$)

\$4890.-

6 Is lender a financial institution?

Y

8 L

address;

City;

State;

Zip Code

5 Vineyard Lane

McKinney, Texas 75070

10 Interest rate

N/A

11 Maturity date

N/A

12 Principal occupation / Job title (See Instructions)

Swim Instructor

13 Employer (See Instructions)

Self - Employed

14 Description of Collateral

none

15

Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address;

State;

Zip Code

not applicable

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

4/14/23

Name of lender

Rachel L. Elliott

out-of-state PAC (ID#: _____)

Loan Amount (\$)

\$3,814.00

Is lender a financial institution?

Y

Lender address;

5825 Vineyard Lane

City;

McKinney, TX 75070

State;

Zip Code

Interest rate

N/A

Maturity date

N/A

Principal occupation / Job title (See Instructions)

Swim Instructor

Employer (See Instructions)

Self - ed

Description of Collateral

none

Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address;

State;

Zip Code

not applicable

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender 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 and Schedule E are located in the Appendix of the Form 278e-ER. 1 Total pages Schedule E

2 FILER NAME

6 Is lender
a financial
institution?

State: Zip Code

10 Interest rate

11 Maturity date

14 Description of Collateral

15

none

16 GUARANTOR
INFORMATION

17 Name of guarantor

Rachel L. Elliott
City:

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

21 Employer (See Instructions)

\$ 19,060.86

5 Date of loan

7 Name of lender

out-of-state PAC

9 Loan Amount (\$)

4/18/23

Rachel L. Elliott

\$ 2,728.80

8 Lender address;

City;

N/A

Is lender
a financial
institution?

5825 Vineyard Lane
Lender address;

McKin, TX 75070

N/A

Maturity date

Name of guarantor

Amount Guaranteed (\$)

Principal Occupation (See Instructions)

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 Expenses

11/23

\$75.10

City:

PURPOSE OF EXPENDITURE

(c) Check/Item outside of Texas. Complete Schedule T.

PURPOSE OF EXPENDITURE

Date

Payee name

4/11/23

Keeper Press

Amount (\$)

address:

\$652.07

Loma Press
Heath, Tx 75032

Description

PURPOSE OF EXPENDITURE

Advertising Expenses

Supplies - Signs

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not available, DO NOT leave blank.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
4-20-23	AXIOM STRATEGIES		
\$3,814.00	5999 Custer Road #110-189 TX 75035		
			Travel In District Travel Out Of District Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

3 Filer ID (Ethics Commission Filers)

Date: 4-20-23
 5 Payee name: AXIOM STRATEGIES
 6 Amount (\$): \$3,814.00
 Credit Card Payment:
 State: TX Zip Code: 75035

1 Total pages Schedule F1: 7
 2 FILER NAME: RACHEL L TENPOT
 8 (b) Description: Mailers
 4 Date: 4-20-23
 PURPOSE OF EXPENDITURE

Candidate / Officeholder name: _____ Office sought: _____ Office held: _____
 (a) Category (See Categories listed at the top of this schedule): _____
 Zip Code: _____

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not available DO NOT include this page in the

EXPENDITURE CATEGORIES FOR BOX 8(a)

- Solicitation/Fundraising Expense
- Transportation Equipment & Related Expenses
- Travel In District
- Travel Out Of District
- Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

6 Amount (\$)

City;

Zip Code

\$ 49.77

(b) Description

T-shirts

PURPOSE OF EXPENDITURE

Office held

keeper

ath TX 75037

State;

Zip Code

\$

Advertising Expenses

Description

Supplies - Signs

PURPOSE OF EXPENDITURE

4/02/23

State;

Zip Code

Description

PURPOSE OF EXPENDITURE

state

Fee

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

The Instruction Guide explains how to complete this form.

Rachel L. Elliott

4-15-23

Dunkin'

Payee address:

3201 W. Eldorado Pkwy
McKinney, Texas 75070

\$59.00

(b) Description

PURPOSE OF EXPENDITURE

Food/Beverage Expense

Beverage

(c)

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX, officeholder living expense.

Date

4-15-23

Walgreens #04643

Payee address:

3001 Eldorado Pkwy
McKinney, TX 75070

\$4.79

Categories listed at the top of this schedule.)

PURPOSE OF EXPENDITURE

Food/Beverage Expense

Misc

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX, officeholder living expense.

name

4/17/23

Edgerton Strategies

Amount (\$)

P

ress:

City:

\$300-

Keller Parkway, #108-402
Keller, Texas 76248

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

Description

PURPOSE OF EXPENDITURE

Advertising Expenses

Info.

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX, officeholder living expense.

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 in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Travel Expense

The Instruction Guide explains how to complete this form.

2 FILER NAME

Rachael L. Elliott

3 Filer ID (Ethics Commission Filers)

4 Date

4/24/23

5 Payee name

Edgerton Strategies

6 Expenditure type

7 Payee

8 City

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

PURPOSE

Advertising Expense

(b) Description

POLITICAL EXPENDITURE STATEMENT

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Accounting/Printing

Consulting Expense

Contributions/Donations Made By

Credit Card Payment

Total page Schedule E1 - 2 FILED PAGE

7

7 Payee address, Legal Services, Expense, Salaries/Wages/Contract Labor, Rental Expense, Transportation Equipment & Related Expense, Travel In District, Travel Out Of District, Other (enter a category not listed above)

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

3 Filer ID (Ethics Commission Filers)

4 Date 4/20/23

5 Payee name Fa book

6 Amount (\$)

\$25-

City; State; Zip Code

1 Hacker Way
Menlo Park, CA 94025

8

PURPOSE OF EXPENDITURE

Advertising Expenses

Ad

Office sought

Office held

City: