

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

1 Filer ID (Ethics Commission Filer)

2 Total pages filed:

The C/OH Instruction Guide explains how to complete this form.

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

OFFICE USE ONLY

LYNN

SPERRY

Date Received

NICKNAME

LAST

SUFFIX

4-28-2023

2/26/23

AREA CODE

CITY

STATE ZIP CODE

AREA COOF

PHONE NUMBER

EXTENSION

Date Hand-delivered or Date Postmarked

MS / MRS / MR

FIRST

CLARK

CITY

Receipt #

Date Processed

NICKNAME

LAST

SUFFIX

Date Imaged

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

STATE

ZIP CODE

TX

AREA CODE

EXTENSION

d

9 REPORT TYPE

January 15

30th day before election

15th day after campaign
manager appointment

Month Day Year

Primary

05-06-2023

General

July 15

8th day before election

Final Report (Attach C/OH -

Month Day Year

Month Day Year

THROUGH

Change of Address

CELEBRATION DATE

ELECTION TYPE

Runoff

SPECIFIC

Special

OFFICE (FSA) (IL 201)

13 OFFICE BOUGHT (if known)

COMMITTEE TYPE COMMITTEE NAME

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

SEE INSTRUCTIONS ON THIS PAGE IN THE REPORT

out-of-state PAC

State:

out-of-state PAC

The Instruction Guide explains how to

1 Total pages Schedule A1

SEE INSTRUCTIONS ON THIS PAGE IN THE REPORT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

out-of-state PAC

out-of-state PAC

out-of-state PAC (ID# _____)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

2 FILER NAME

LYNN SPERRY

3 Filer ID (Ethics Commission Filers)

4 Date

4/18

5 Full name of contributor

WILL HODGES

7 Amount of contribution (\$)

\$1000.00

6 Contributor address;

1524 ARBOR WALK DR

City;

State; Zip Code

TX 75074

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

1 Total pages Schedule A1

out-of-state PAC (ID#)

EX

out-of-state PAC (ID#)

2 FILER NAME

LYNN SPERRY

3 Filer ID (Ethics Commission Filers)

out-of-state PAC (ID#)

Full name of contributor

out-of-state PAC (ID#)

4/8

BRIAN MAN

6 Contributor address;

6813 NORMAL ROCKWELL
LA

State; Zip Code

TX 75071

\$125

8 Principal occupation / Job title (See

9 Employer (See Instructions)

Date

Full name of contributor

Amount of contribution (\$)

Contributor address;

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Total pages Schedule AZ: 1

Page 5 of 5

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

8 Amount of Contribution \$

MIKE

7 Contributor

9 9 9 9

Check if travel outside of Texas. Complete Schedule T.

11 14

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

Checklist Austin, TX officeholder living expense

6. P name
COMMUNITY

Advertising Expense
Accounting/Banking

EXPENDITURE (FOR BOX 10(s))
S
T
Travel District
Of
not listed above
By
cal Committee
pense

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4

2. FILER NAME

3 Filer ID (Ethics Commission Filers)

EXPENDITURE MADE BY CREDIT CARD

Posted transactions

COMMUNITY IMPACT NEWSP

\$300.00
300 AAdvantage[®] miles

Feb 7th, 2023

TOTAL

02/17/23

\$300.00

Purchases

\$0.00

Credits

300

Rewards earned

[REDACTED TABLE CONTENTS]

Check if travel outside of Texas. Complete Schedule T.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Event Expense	ng	ted
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

Check if Austin, TX, officeholder living expense

EXPENDITURE CATEGORIES FOR BOX 10(a)

\$

pense

Check if Austin, TX, officeholder living expense (not listed above)

The Instruction Guide explains how to complete this form.

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking

By
Political Committee

Expense

Travel In District

Category not listed above)

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filers)

FILER NAME

Check if travel outside of Texas. Complete Schedule T.

5 Date

2023

7 Amount (\$)

\$300

Posted transactions

COMMUNITY IMPACT NEWSP
Apr 10th, 2023

Easy Pay eligible \$1,075.00 +
1,075 AAdvantage[®] miles

COMMUNITY IMPACT NEWSP
Apr 10th, 2023

Easy Pay eligible \$300.00 +
300 AAdvantage[®] miles

COMMUNITY IMPACT NEWSP
Apr 10th, 2023

Easy Pay eligible \$2,075.00 +
2,075 AAdvantage[®] miles

ARC Payment Received
Apr 9th, 2023

~~-\$4,856.44~~ +

Alpha Media LLC - Nort
Apr 6th, 2023

Easy Pay eligible \$186.00 +
186 AAdvantage[®] miles

PAYPAL *VISTAPRINTC
Mar 28th, 2023

Easy Pay eligible \$1,441.08 +
1,441 AAdvantage[®] miles

CKO*WWW.ISTOCKPHOTO.CO
Mar 22nd, 2023

\$64.95 +
65 AAdvantage[®] miles

TOTAL
04/17/23

\$5,142.03
Purchases

-\$4,856.44
Credits

5,142
Rewards earned