

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	2 Total pages filed: 22
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	Stephen		
	NICKNAME	LAST	SUFFIX
	Lecholop		
OFFICE USE ONLY			
Date Received 04-05-21 P 04:56 RCVD			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	PO Box 12252		
	San Antonio, TX 78212		
	Date Hand-delivered or Date Postmarked		
Receipt #		Amount	
Date Processed			
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mrs. Diana		
	NICKNAME	LAST	SUFFIX
	Treino		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	332 King William San Antonio TX 78204		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	210 744 4508		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month	Day	Year
	01/01/2021		THROUGH 03/22/2021
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
05/01/2021		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)
	San Antonio Independent School District Trustee Place San Antonio District 1 Bexar		

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

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

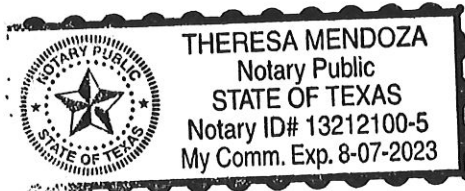
2 of 22

13 C / OH NAME Lecholop, Stephen	14 Filer ID
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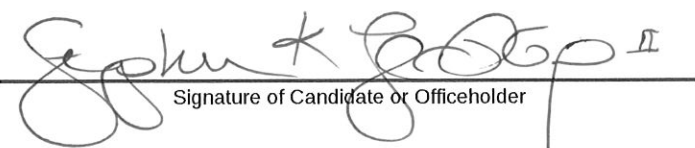
15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 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)	\$	35,670.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	11,778.94
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	23,891.06
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT




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 or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Stephen K. Lecholop II, this the 1st day of April, 2021, to certify which, witness my hand and seal of office.



 Signature of officer administering

Theresa Mendoza

 Printed name of officer administering

Notary

 Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Lecholop, Stephen		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 35,670.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 11,778.94
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.15

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/7 Rpt: 4/22
2 FILER NAME Lecholop, Stephen		3 Filer ID
4 Date 03/03/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amatangelo, Gina <hr/> 6 Contributor address; City; State; Zip Code 202 Delaware Street San Antonio, TX 78210	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amini, Rex <hr/> Contributor address; City; State; Zip Code 1803 Broadway San Antonio, TX 78215	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/01/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbour, Justin <hr/> Contributor address; City; State; Zip Code 602 E Guenther San Antonio, TX 78210	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boos, Jonathan <hr/> Contributor address; City; State; Zip Code PO Box 495072 Garland, TX 75049	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown and Ortiz <hr/> Contributor address; City; State; Zip Code 112 E Pecan San Antonio, TX 78205	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/7 Rpt: 5/22
2 FILER NAME Lecholop, Stephen		3 Filer ID
4 Date 03/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brozovich, John <hr/> 6 Contributor address; City; State; Zip Code 333 Paseo Encinal Street San Antonio, TX 78212	7 Amount of Contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/01/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Butt Public Education PAC <hr/> Contributor address; City; State; Zip Code PO Box 6033 San Antonio, TX 78209	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/05/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clifton, Jacob <hr/> Contributor address; City; State; Zip Code 119 Belles Fleurs Circle Little Rock, AR 72223	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cross, Ed <hr/> Contributor address; City; State; Zip Code 2 Laurel Pl San Antonio, TX 78209	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Samuel <hr/> Contributor address; City; State; Zip Code 129 Turnberry Way San Antonio, TX 78230	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/7 Rpt: 6/22
2 FILER NAME Lecholop, Stephen		3 Filer ID
4 Date 03/22/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson Jr, Eugene	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 10 Tilbury Lane San Antonio, TX 78230		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Educational Equity PAC	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code 6312 Seven Corners Center Falls Church, VA 22044		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elmendorf, Annie	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 422 King William Street San Antonio, TX 78204		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emmett, Marita	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 303 Adams St San Antonio, TX 78210		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Escamilla, Pablo	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 1301 Richmond Avenue Houston, TX 77006		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/7 Rpt: 7/22
2 FILER NAME Lecholop, Stephen		3 Filer ID
4 Date 03/22/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Nick <hr/> 6 Contributor address; City; State; Zip Code 602 Mission St San Antonio, TX 78210	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, John <hr/> Contributor address; City; State; Zip Code 138 E Hollywood Ave San Antonio, TX 78212	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joeris, Gary <hr/> Contributor address; City; State; Zip Code 823 Arion Pkwy San Antonio, TX 78216	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leadership for Educational Equity <hr/> Contributor address; City; State; Zip Code 1805 7th St. N.W. Washington, DC 20001	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/03/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leadership for Educational Equity <hr/> Contributor address; City; State; Zip Code 1805 7th St. N.W. Washington, DC 20001	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/7 Rpt: 8/22
2 FILER NAME Lecholop, Stephen		3 Filer ID
4 Date 03/05/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson, LLP	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code PO Box 17428 Austin, TX 78760		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/28/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Robert	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 128 Adams St. San Antonio, TX 78210		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendez, Larry	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 204 Fawn Dr San Antonio, TX 78231		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moll, William	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 433 College Boulevard San Antonio, TX 78209		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroy, Rodrigo	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 300 Labor Street San Antonio, TX 78210		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/7 Rpt: 9/22
2 FILER NAME Lecholop, Stephen		3 Filer ID
4 Date 03/13/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morton, Russell	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code 61 Parker Road Wellesley, MA 02482	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueschke, Nicholas	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 114 Leopold St San Antonio, TX 78210	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poneck, Douglas	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 127 West Woodlawn Avenue San Antonio, TX 78212	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/03/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raquet, Robin	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Wickes St San Antonio, TX 78210	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rico, Victoria	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code 127 East Ridgewood Court San Antonio, TX 78212	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/22
2 FILER NAME Lecholop, Stephen		3 Filer ID
4 Date 02/18/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shannon, Manuela	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code P.O. Box 120041 San Antonio, TX 78212		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shown, William	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 212 Madison San Antonio, TX 78204		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Eman, Murray	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1118 Grey Oak Drive San Antonio, TX 78213		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walesa, Jim	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Park Ridge, IL		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Matthew	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 7526 Carriage Pass San Antonio, TX 78249		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 1/11 Rpt: 11/22	2 FILER NAME Lecholop, Stephen	3 Filer ID
4 Date 03/11/2021	5 Payee name AMAZON	
6 Amount (\$) \$21.63	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 03/10/2021	Payee name AMAZON	
Amount (\$) \$7.52	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 03/15/2021	Payee name ANEDOT	
Amount (\$) \$511.20	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment Processing
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 2/11 Rpt: 12/22		2 FILER NAME Lecholop, Stephen		3 Filer ID	
4 Date 03/08/2021		5 Payee name BAKERY LORRAINE			
6 Amount (\$) \$16.02		7 Payee address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/09/2021		Payee name BIG FROG CUSTOM T-SHIRTS			
Amount (\$) \$463.04		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-shirts	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/15/2021		Payee name Baumgarten, Jonah			
Amount (\$) \$2,000.00		Payee address; City; State; Zip Code 2750 Holly Hall St Houston, TX 77054			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Management	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 3/11 Rpt: 13/22	2 FILER NAME Lecholop, Stephen	3 Filer ID
4 Date 03/17/2021	5 Payee name CAMPAIGN SERVICES LLC	
6 Amount (\$) \$1,250.00	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/16/2021	Payee name CASCABEL MEXICAN PATIO	
Amount (\$) \$35.22	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/01/2021	Payee name CASCABEL MEXICAN PATIO	
Amount (\$) \$24.89	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 4/11 Rpt: 14/22		2 FILER NAME Lecholop, Stephen		3 Filer ID	
4 Date 03/05/2021		5 Payee name CRAIGSLIST.ORG			
6 Amount (\$) \$35.00		7 Payee address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hiring	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/17/2021		Payee name CSG INC.			
Amount (\$) \$885.00		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/09/2021		Payee name FROST BANK			
Amount (\$) \$15.00		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 5/11 Rpt: 15/22		2 FILER NAME Lecholop, Stephen		3 Filer ID	
4 Date 01/11/2021		5 Payee name GODADDY			
6 Amount (\$) \$9.17		7 Payee address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/12/2021		Payee name H-E-B			
Amount (\$) \$4.19		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/17/2021		Payee name HARLAND CLARKE			
Amount (\$) \$62.73		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Checks	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 6/11 Rpt: 16/22		2 FILER NAME Lecholop, Stephen		3 Filer ID	
4 Date 03/19/2021		5 Payee name Hurd, Tanisha			
6 Amount (\$) \$165.00		7 Payee address; City; State; Zip Code 2710 Goliad Rd San Antonio, TX 78223			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field Outreach	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/01/2021		Payee name LEADERSHIP FOR EDUCATIONAL EQUITY			
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/01/2021		Payee name LOCAL COFFEE			
Amount (\$) \$8.85		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Meeting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 7/11 Rpt: 17/22	2 FILER NAME Lecholop, Stephen	3 Filer ID
4 Date 01/15/2021	5 Payee name MLK5KRUNWALK	
6 Amount (\$) \$104.00	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Community Event
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 03/19/2021	Payee name Mooney, David	
Amount (\$) \$165.00	Payee address; City; State; Zip Code 2711 Goliad Rd San Antonio, TX 78223	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field Outreach
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 03/11/2021	Payee name OFFICEMAX/DEPOT	
Amount (\$) \$3.24	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 8/11 Rpt: 18/22	2 FILER NAME Lecholop, Stephen	3 Filer ID
4 Date 03/16/2021	5 Payee name PRESTIGE PRINTING, LLC	
6 Amount (\$) \$465.48	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/01/2021	Payee name PRESTIGE PRINTING, LLC	
Amount (\$) \$3,815.82	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/22/2021	Payee name SCHNABELS HARDWARE	
Amount (\$) \$8.64	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 9/11 Rpt: 19/22		2 FILER NAME Lecholop, Stephen		3 Filer ID	
4 Date 03/04/2021		5 Payee name TEXAS DEMOCRATIC PARTY			
6 Amount (\$) \$325.00		7 Payee address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Database	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/01/2021		Payee name THE HAVEN SOUTHTOWN			
Amount (\$) \$6.77		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Meeting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/15/2021		Payee name THE HOME DEPOT			
Amount (\$) \$12.57		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 10/11 Rpt: 20/22	2 FILER NAME Lecholop, Stephen	3 Filer ID		
4 Date 03/02/2021	5 Payee name TIFF'S TREATS			
6 Amount (\$) \$192.14	7 Payee address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Expense		
	<table style="width:100%; border:none;"> <tr> <td style="width:33%; border:none;">Candidate/Officeholder name</td> <td style="width:33%; border:none;">Office sought</td> <td style="width:33%; border:none;">Office held</td> </tr> </table>		Candidate/Officeholder name	Office sought
Candidate/Officeholder name	Office sought	Office held		
Date 03/09/2021	Payee name WALMART			
Amount (\$) \$9.41	Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies		
	<table style="width:100%; border:none;"> <tr> <td style="width:33%; border:none;">Candidate/Officeholder name</td> <td style="width:33%; border:none;">Office sought</td> <td style="width:33%; border:none;">Office held</td> </tr> </table>		Candidate/Officeholder name	Office sought
Candidate/Officeholder name	Office sought	Office held		
Date 02/25/2021	Payee name WIX			
Amount (\$) \$7.03	Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website		
	<table style="width:100%; border:none;"> <tr> <td style="width:33%; border:none;">Candidate/Officeholder name</td> <td style="width:33%; border:none;">Office sought</td> <td style="width:33%; border:none;">Office held</td> </tr> </table>		Candidate/Officeholder name	Office sought
Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 11/11 Rpt: 21/22	2 FILER NAME Lecholop, Stephen	3 Filer ID
4 Date 02/16/2021	5 Payee name WIX	
6 Amount (\$) \$149.38	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Office held		

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 22/22
2 FILER NAME Lecholop, Stephen		3 Filer ID
4 Date 03/22/2021	5 Name of person from whom amount is received Frost Bank	8 Amount (\$) \$0.15
6 Address of person from whom amount is received; City; State; Zip Code TX		
7 Purpose for which amount is received Bank Account Interest		<input type="checkbox"/> Check if political contribution returned to filer