

# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC  
COVER SHEET PG 1

<b>The SPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00086382	<b>2</b> Total pages filed: 9
<b>3</b> COMMITTEE NAME Keeping LISD Strong		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 07/17/2023	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 14519 Ridgetop Terrace  Austin, TX 78732		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
			Date Imaged
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Stephanie	MI
	NICKNAME	LAST Holdren	SUFFIX
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 14519 Ridgetop Terrace  Austin, TX 78732		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 14519 Ridgetop Terrace  Austin, TX 78732		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(512)	293-0831	
<b>9</b> REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Exceeded modified reporting limit
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff	<input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination
<b>10</b> PERIOD COVERED	Month Day Year 04/27/2023	THROUGH	Month Day Year 06/30/2023
<b>11</b> ELECTION	ELECTION DATE Month Day Year 05/06/2023	ELECTION TYPE	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Special <input type="checkbox"/> Other

**GO TO PAGE 2**

# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Keeping LISD Strong	<b>13 Filer ID</b> (Ethics Commission Filers) 00086382
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<b>14 COMMITTEE PURPOSE</b>  (Attach lists on plain paper to complete this report if necessary.)  <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure)  <input type="checkbox"/> OPPOSE (Candidate or Measure)  <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate  <input type="checkbox"/> Officeholder	<b>CANDIDATE / OFFICEHOLDER NAME</b>  _____  <b>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</b>  _____	
	<input checked="" type="checkbox"/> Measure	<b>BALLOT IDENTIFICATION / #</b> _____ <b>ELECTION DATE</b> Month Day Year 05/06/2023  <b>DESCRIPTION</b> LISD Bond Proposition A: Safety & Security, renovations, new facilities	

<b>15 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED	\$	\$0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	\$270.30
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	\$0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	\$4,967.67
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	\$7,899.24
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	\$0.00

**16 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.

\_\_\_\_\_  
 Stephanie Holdren  
 Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
 Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE

**FORM SPAC  
ADDENDUM**

Page 3 of 9

<b>12 COMMITTEE NAME</b> Keeping LISD Strong	<b>13 Filer ID</b> (Ethics Commission Filers) 00086382
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<b>14 COMMITTEE PURPOSE</b> (Attach lists on plain paper to complete this report if necessary.)  <input checked="" type="checkbox"/> <b>SUPPORT</b> (Candidate or Measure)  <input type="checkbox"/> <b>OPPOSE</b> (Candidate or Measure)  <input type="checkbox"/> <b>ASSIST</b> (Officeholders only)	<input type="checkbox"/> CANDIDATE  <input type="checkbox"/> OFFICE HOLDER	<b>CANDIDATE / OFFICE HOLDER NAME</b>  OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)						
	<input checked="" type="checkbox"/> <b>MEASURE</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;"><b>BALLOT IDENTIFICATION</b></td> <td style="width:40%;"><b>ELECTION DATE</b></td> </tr> <tr> <td></td> <td style="text-align: center;">MONTH DAY YEAR</td> </tr> <tr> <td></td> <td style="text-align: center;">05/06/2023</td> </tr> </table>	<b>BALLOT IDENTIFICATION</b>	<b>ELECTION DATE</b>		MONTH DAY YEAR		05/06/2023
	<b>BALLOT IDENTIFICATION</b>	<b>ELECTION DATE</b>						
	MONTH DAY YEAR							
	05/06/2023							
<b>DESCRIPTION</b> LISD Bond Proposition B: Replacement of devices & equipment								

<b>COMMITTEE PURPOSE</b> (Attach lists on plain paper to complete this report if necessary.)  <input checked="" type="checkbox"/> <b>SUPPORT</b> (Candidate or Measure)  <input type="checkbox"/> <b>OPPOSE</b> (Candidate or Measure)  <input type="checkbox"/> <b>ASSIST</b> (Officeholders only)	<input type="checkbox"/> CANDIDATE  <input type="checkbox"/> OFFICE HOLDER	<b>CANDIDATE / OFFICE HOLDER NAME</b>  OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)						
	<input checked="" type="checkbox"/> <b>MEASURE</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;"><b>BALLOT IDENTIFICATION</b></td> <td style="width:40%;"><b>ELECTION DATE</b></td> </tr> <tr> <td></td> <td style="text-align: center;">MONTH DAY YEAR</td> </tr> <tr> <td></td> <td style="text-align: center;">05/06/2023</td> </tr> </table>	<b>BALLOT IDENTIFICATION</b>	<b>ELECTION DATE</b>		MONTH DAY YEAR		05/06/2023
	<b>BALLOT IDENTIFICATION</b>	<b>ELECTION DATE</b>						
	MONTH DAY YEAR							
	05/06/2023							
<b>DESCRIPTION</b> LISD Bond Proposition C: Renovations to 2 performing arts centers								

# SUBTOTALS - SPAC

<b>17 COMMITTEE NAME</b> Keeping LISD Strong	<b>18 Filer ID</b> (Ethics Commission Filers) 00086382
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<b>19 SCHEDULE SUBTOTALS</b>		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 270.30
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 C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 4,967.67
9.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
14.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/1 Rpt: 5/9
<b>2</b> FILER NAME Keeping LISD Strong		<b>3</b> Filer ID (Ethics Commission Filers) 00086382
<b>4</b> Date 05/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scheibal, Stephen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78751	<b>7</b> Amount of Contribution (\$)  \$270.30
<b>8</b> Principal occupation / Job title (See Instructions) Co-Founder		<b>9</b> Employer (See Instructions) New West Communications

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/4 Rpt: 6/9	<b>2</b> FILER NAME Keeping LISD Strong	<b>3</b> Filer ID (Ethics Commission Filers) 00086382
<b>4</b> Date 04/27/2023	<b>5</b> Payee name Allison Newsum Design	
<b>6</b> Amount (\$) \$300.00	<b>7</b> Payee address; City; State; Zip Code 7711 Wykeham  Austin, TX 78749	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense design services
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/02/2023	Payee name Call Multiplier	
Amount (\$) \$930.00	Payee address; City; State; Zip Code 201 Robert S Kerr Ave  Oklahoma City, OK 73102	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Automated calls
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/04/2023	Payee name Campaign Verify	
Amount (\$) \$95.00	Payee address; City; State; Zip Code 1215 31st Street, NW  Washington, DC 20007	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense texting service
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.

<b>1</b> Total pages Schedule F1: Sch: 2/4 Rpt: 7/9	<b>2</b> FILER NAME Keeping LISD Strong	<b>3</b> Filer ID (Ethics Commission Filers) 00086382
<b>4</b> Date 05/01/2023	<b>5</b> Payee name Dirt Cheap Signs	
<b>6</b> Amount (\$) \$271.17	<b>7</b> Payee address; City; State; Zip Code 6706 Lohman Ford Road  Lago Vista, TX 78645	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 4' x 4' road signs and stakes
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/05/2023	Payee name DonorBox	
Amount (\$) \$12.19	Payee address; City; State; Zip Code 601 King Street Suite 200 Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees from donation website
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/30/2023	Payee name Four Points News	
Amount (\$) \$431.00	Payee address; City; State; Zip Code 3129 Rippling Creek Court  Austin, TX 78732	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper advertising
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.

<b>1</b> Total pages Schedule F1: Sch: 3/4 Rpt: 8/9	<b>2</b> FILER NAME Keeping LISD Strong	<b>3</b> Filer ID (Ethics Commission Filers) 00086382
<b>4</b> Date 04/27/2023	<b>5</b> Payee name Hill Country News	
<b>6</b> Amount (\$) \$1,356.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 1777  Cedar Park, TX 78630	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper advertising
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2023	Payee name Label Maker	
Amount (\$) \$82.39	Payee address; City; State; Zip Code 43 boulevard Auguste Blanqui  Paris 75013 France	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labels for postcards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/03/2023	Payee name Staples	
Amount (\$) \$182.92	Payee address; City; State; Zip Code 2112 SW H K Dodgen Loop Suite 183 Suite 183  Temple, TX 76504	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of postcards
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.

<b>1</b> Total pages Schedule F1: Sch: 4/4 Rpt: 9/9	<b>2</b> FILER NAME Keeping LISD Strong	<b>3</b> Filer ID (Ethics Commission Filers) 00086382
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<b>4</b> Date 05/01/2023	<b>5</b> Payee name TX Ethics Commission
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<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code PO Box 12070 Capitol Station Austin, TX 78711-2070
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee for 30 day pre-election report being late.
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/02/2023	Payee name US Postal Service
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Amount (\$) \$807.00	Payee address; City; State; Zip Code 801 S Highway 183  Leander, TX 78641
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage for postcards
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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