CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete		1 Filer ID (Ethics Commis 00085868	ssion Filers)	2 Total pages fi	led: 9
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
NAME	Ms. E	Elizabeth M.			Date Received	
					ELECTRONIC	ALLY FILED
	NICKNAME L	 -AST		SUFFIX	10/28/2024	
		Coffey		SUFFIX	10/20/2021	
4 CANDIDATE /	ADDRESS / PO BOX; APT / S	SUITE #; CITY	Υ;	ZIP CODE	Date Hand-delivered of	or Date Postmarked
OFFICEHOLDER MAILING	10742 white settlement road	I				T
ADDRESS					Receipt #	Amount
Change of Address	Fort Worth, TX 76108				Data Brassand	
🖰					Date Processed	
					Date Imaged	
					Date imaged	
5 CAMPAIGN	MS/MRS/MR F	IRST		MI	L	
TREASURER		Courtney				
NAME	IVIS.	oditiley				
	ALIO(ALAME					
		AST ⁄Iiller		SUFFIX		
	IV	ıllıer				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BO	OX PLEASE);	APT	/ SUITE #; CITY;	; STA	ATE; ZIP CODE
ADDRESS	3837 Linden Ave.					
(Residence or Business)						
	Fort Worth, TX 76107					
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	VTENCION			
7 CAMPAIGN TREASURER		NUMBER E	XTENSION			
PHONE	(817) 271-4521					
8 REPORT						
TYPE	January 15	30th day before	election	Runoff	15th day after ca	mpaign treasurer
	U sandary 15	court day before		L	appointment (offi	ceholder only)
	July 15 X	8th day before e	lection	Exceeded modified	Final Report (Atta	ach C/OH-FR)
				reporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	09/27/2024	TH	ROUGH	10/26/202	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	Pri	imary	Runoff	Other	
	11/05/2024	X Ge	eneral	Special		
				ш.		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	C (if known)	
III OFFICE	State Representative District	t 99 Tarrant		State Represent		
	State Representative Distric	t 33 Tarrant		State Represent	tative District 33	
		GO T	O PAGE 2			
I						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 9

13 C / OH NAME	Coffey, Elizabeth M.	(Ms.)	14 Filer ID ((Ethics Commiss	sion Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of candidate / officeholder. consent. Candidates and	the candidate's or office	eholder's knowle	dge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00
	2. TOTAL POLITIC (OTHER THAN I	5)	\$	550.00	
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$	0.00	
	4. TOTAL POLITIC		\$	6,369.25	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	4,305.91
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.			
		Ms. E	lizabeth M. Coffey		
		Signature of	Candidate or Officehol	der	
AFFIX NO	TARY STAMP / SEAL AB	DVE			
Sworn to and subs	cribed before me, by the s	aid	, this the	da	ay
		ertify which, witness my hand and seal of office.			
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering o	eath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

		3 of 9
18 FILER NAME Coffey, Elizabeth M. (Ms.)	19 Filer ID 00085868	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 550.00	
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$ 4,094.75
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$
8. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 1,025.00
9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 1,249.50
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	\$	
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/9	
2	FILER NAME Coffey, Eliza	beth M. (Ms.)		3	Filer ID (Ethics Commission 00085868	Filers)
4	Date 10/07/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$20.00
8	Principal occu	Fort Worth, TX 76114 pation / Job title (See Instructions))			
_	Date 10/06/2024	Full name of contributor		Amount of Contribution (\$)	\$15.00	
	Principal occu	Fort Worth, TX 76116 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/03/2024 Hamill, Samuel Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$15.00
	Principal occu	Fort Worth, TX 76179 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID#: Hazelton, Jean Marie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$300.00
	Principal occu	Hampton Bays, NY 11946 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/21/2024	Full name of contributor out-of-state PAC (ID#: lvey, Jim Contributor address; City; State; Zip Code Colleyville, TX 76034			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/9		
2	FILER NAME Coffey, Eliza	abeth M. (Ms.)		3	Filer ID (Ethics Commission 00085868	on Filers)
4	Date 10/16/2024	5 Full name of contributor out-of-state PAC (ID#: Miers, Mitchell (Mr.) 6 Contributor address; City; State; Zip Code	7	Amount of Contribution (\$)	\$100.00	
8	Principal occu	Grapevine, TX 76051 upation / Job title (See Instructions)	9 Employer (See Instructions	 - s)		
	Date 10/22/2024	Full name of contributor out-of-state PAC (ID#: Miller, Denise Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Azle, TX 76020 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 10/17/2024	Full name of contributor out-of-state PAC (ID#: Vallot, Jenny Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Metairie, LA 70001 upation / Job title (See Instructions)	Employer (See Instructions) (s)		

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 Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment		mmittee I	Git/Awards/Memorials E Legal Services The Instruction Gu i	Sala		iges/	Contract Labor		OTHER (e		category not listed above)
<u> </u>	T	_			ac explains non		Pic	1	_	F" 15		(Filippo Operation of Files)
1	Total pages Schedule F1:	2							3	Filer ID		(Ethics Commission Filers)
	Sch: 1/1 Rpt: 6/9		Coffey, Eliza	abeth M. (Ms.)						000858	68	
4	Date	5	Payee name									
	10/21/2024		Las Colinas	Media Brokers								
6	Amount (\$)	7	Payee addres	s; City;	State; Zij	p Cod	e					
	\$3,540.00		Legalcorp S	olutions, LLC								
			509 N Durar	nao Cir								
			Irving, TX 75	_								
8	PURPOSE	(2)				10	h)	Description				
١	OF	ره) ا	Advertising I	e Categories listed at the	e top of this schedule))	IJ)	Description Check if travel of	outsio	de of Texas.	. Comr	plete Schedule T.
	EXPENDITURE		Advertising i	Expense				Check if Austin,				
								Radio adverti				
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Office	e sougl	ht			Offic	ce he	eld
	experiulture to beliefit C/Oi	<u>'</u>										
	Date		Payee name									
	10/25/2024		Symons, Dia	ane								
	Amount (\$)		Payee addres	s; City;	State; Zij	p Cod	е					
	\$554.75		1307 Mildred	d Lane								
			Benbrook, T	X 76126								
	PURPOSE	(a)	Category (Se	e Categories listed at the	e top of this schedule)) (1	b)	Description				
	OF EXPENDITURE		Consulting E	Expense								plete Schedule T.
								Composing me				expense
								Campaign ma	ana	igei pay	TOII	
	Complete ONLY if direct	<u> </u>	Candidate/Offic	ocholder name	Office	e sougl	ht			Offic	ce he	ald.
	expenditure to benefit C/OI		Januluale/Onic	enoluei name	Office	e sougi	H			Onic	e ne	au
_											—	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

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 F4:	2 FILER NAME		3 Filer ID (Ethics Commis						
Sch: 1/2 Rpt: 7/9	Coffey, Elizabeth M	1. (Ms.)	00085868						
4 CREDIT CARD ISSUER		ncial institution nase	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
	\$375.00	10/01/2024							
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code					
	Textla		21750 Hardy Oak Boulev	ard					
			San Antonio, TX 78258 (b) Description						
8 PURPOSE OF EXPENDITURE	1 7 7 7 7			_					
X Political	Advertising Expense	or the contocally	Campaign text advertising						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense					
9 Complete ONLY if direct Candidate/Officeholder name Office			e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
	\$50.00	10/22/2024							
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code					
	Textla		21750 Hardy Oak Boulev	ard					
			San Antonio, TX 78258						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description Campaign text advertisement						
X Political									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense					
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
	\$300.00	10/16/2024							
PAYEE	(a) Payee name	I .	(b) Payee address;	City, State, Zip Code					
			21750 Hardy Oak Boulev	ard					
	Textla								
			San Antonio, TX 78258						
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Campaign text advertizing	9					
X Political									
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held					
	•								

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Mange/Control Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

1 Total pages Schedule F4: Sch: 2/2 Rpt: 8/9 Coffey, Elizabeth M. (Ms.) 4 CREDIT CARD ISSUER Name of financial institution see previous Name of financial institution see previous 1 Total pages Schedule F4: Coffey, Elizabeth M. (Ms.) Name of financial institution see previous 1 Total pages Schedule F4: Schedule	State, Zip Code				
A CREDIT CARD ISSUER Name of financial institution see previous See P	State, Zip Code				
See previous See Preve Previous See Previous See Previous See Previous See Previo	ng expense				
\$250.00 10/25/2024 7 PAYEE (a) Payee name Textla (a) Category (See Categories listed at the top of this schedule) Advertising Expense (c) Check if travel outside of Texas. Complete Schedule T. PAYMENT (a) Amount Charged \$50.00 (b) Payee address; City, 21750 Hardy Oak Boulevard (b) Description Campaign text advertisement (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Office sought Office held \$50.00 (c) Date(s) Credit Card Issuer Paid Textla Textla San Antonio, TX 78258	ng expense				
7 PAYEE (a) Payee name Textla (a) Payee name Textla (b) Payee address; City, 21750 Hardy Oak Boulevard San Antonio, TX 78258 (b) Description campaign text advertisement (c) Check if travel outside of Texas. Complete Schedule T. PAYMENT (a) Amount Charged S50.00 (b) Description Campaign text advertisement (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Office sought (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name Textla (b) Payee address; City, 21750 Hardy Oak Boulevard (c) Date(s) Credit Card Issuer Paid San Antonio, TX 78258	ng expense				
Textla San Antonio, TX 78258 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description campaign text advertisement (b) Description campaign text advertisement (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name (c) Date(s) Credit Card Issuer Paid (d) Amount Charged \$50.00 10/01/2024 (b) Payee address; City, 21750 Hardy Oak Boulevard Textla San Antonio, TX 78258	ng expense				
8 PURPOSE OF EXPENDITURE X Political Non-Political Candidate/Officeholder name Candidate/Office holder name Candidate/Officeholder name Candi					
See Categories listed at the top of this schedule Advertising Expense Campaign text advertisement					
9 Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged \$50.00 10/01/2024 (b) Payee address; City, 21750 Hardy Oak Boulevard San Antonio, TX 78258					
expenditure to benefit C/OH PAYMENT (a) Amount Charged \$50.00 10/01/2024 (b) Date of Charge 10/01/2024 (c) Date(s) Credit Card Issuer Paid (b) Payee address; City, 21750 Hardy Oak Boulevard San Antonio, TX 78258	t				
PAYEE (a) Payee name (b) Payee address; City, 21750 Hardy Oak Boulevard San Antonio, TX 78258					
PAYEE (a) Payee name (b) Payee address; City, 21750 Hardy Oak Boulevard Textla San Antonio, TX 78258					
Textla Textla San Antonio, TX 78258					
Textla San Antonio, TX 78258	State, Zip Code				
PURPOSE OF (a) Category (b) Description					
EXPENDITURE (See Categories listed at the top of this schedule) Advertising Expense Campaign text advertising	Campaign text advertising				
X Political Advertising Expense					
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder livin	ng expense				
Complete ONLY if direct	t				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services	Polling E Printing	verhead/Rental Expense Expense Expense /Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment		The Instruction Guide explains	how to c	complete this form.	
1	Total pages Schedule G:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 1/1 Rpt: 9/9		Coffey, Elizabeth M. (Ms.)			00085868
4	Date	5	Payee name			
	10/03/2024		Alphagraphics			
6	Amount (\$)	7	Payee address; City; State;	Zip C	ode	
	\$274.50		5836 Camp Bowie Blvd			
	Reimbursement from					
	political contributions intended		Fort Worth, TX 76107			
8	PURPOSE	(a)	Category (See Categories listed at the top of this scho	edule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Event Expense			Check if Austin, TX, officeholder living expense
					Campaign event	banner
L						
9	Complete ONLY if direct expenditure to benefit	Can	didate/Officeholder name		Office sought	Office held
	C/OH					
F	Date		Payee name			
	10/02/2024		Plush in a Rush			
H	Amount (\$)		Payee address; City; State;	Zip C	code	
	\$975.00		1223 Security Drive			
	Reimbursement from					
	political contributions intended		Dallas, TX 75247			
	PURPOSE		Category (See Categories listed at the top of this sche	edule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Event Expense			Check if Austin, TX, officeholder living expense
					Plush toys to give	e away at campaign event
L						
	Complete ONLY if direct expenditure to benefit	Can	ndidate/Officeholder name		Office sought	Office held
	C/OH					