### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commis 00085989	sion Filers)	2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		ISE ONLY
OFFICEHOLDER	The Honorable	Frederick E.				
NAME					Date Received	
					ELECTRONICA	LLY FILED
	NICKNAME	LAST		SUFFIX	. 03/11/2025	
	-	Frazier				
		Tracion				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING	321 Bachman Creek Dr.					
ADDRESS					Receipt #	Amount
Change of Address	Makimany TV 75072					
	McKinney, TX 75072				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u>-</u>	
TREASURER	Mr.	Brian				
NAME		Bhan				
	NICKNAME	LAST		SUFFIX		
		Loughmiller				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE):	APT	/ SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER	6305 Wildwood Dr.	//		,		,
ADDRESS						
(Residence or Business)						
	McKinney, TX 75072					
7 CAMPAIGN TREASURER		E NUMBER E	XTENSION			
PHONE	(214) 924-6901					
8 REPORT						
TYPE	X January 15	30th day before	election	Runoff	15th day after cam	npaign treasurer
		-			appointment (offic	
	July 15	8th day before e	election	Exceeded modified reporting limit	Final Report (Attac	ch C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2024	TH	ROUGH	12/31/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		rimary	Runoff	Other	
	-					
		□ □ G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)	·		12 OFFICE SOUGHT	(if known)	
	State Representative Distr	ict 61				
		GO T	O PAGE 2			
Forms provided by To	xas Ethics Commission		nics.state.tx.us		Varcia	n V4.1.0.0e302ce0
i sinis provided by Te		www.cti		•	v Ci 310	

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

#### FORM C/OH **COVER SHEET PG 2** 2 of 11

<b>13</b> C / OH NAME	Frazier, Frederick E.	(The Honorable)	14 Filer ID (E 00085989	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without officeholders are required to report this information	the candidate's or officel	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION	1. TOTAL UNITEM	ZED POLITICAL CONTRIBUTIONS (OTHER THA		1
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE ELE		<b>\$</b> 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	<b>\$</b> 290.00
EXPENDITURE TOTALS	3. TOTAL UNITEM		<b>\$</b> 2,013.21	
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 12,149.64
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	<b>\$</b> 899.77
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	<b>\$</b> 5,000.00
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		The Honora	able Frederick E. Fraz	ier
		Signature of	f Candidate or Officehold	ler
AFFIX NOT	TARY STAMP / SEAL ABO	DVE		
Sworn to and subsc	ribed before me, by the s	aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of offic		Printed name of officer administering		administering oath

#### FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 11 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Frazier, Frederick E. (The Honorable) 00085989 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 290.00 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ З. 4. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 12,149.64 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

# MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 **1** Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/11 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Frazier, Frederick E. (The Honorable) 00085989 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 12/09/2024 \$290.00 Frazier, Frederick 6 Contributor address; City; State; Zip Code McKinney, TX 75070 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Co Credit Card Payment							Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2				•	3	Filer ID (Ethics Commission Filers)
-	Sch: 1/7 Rpt: 5/11		Frazier, Frederick E. (The Honor	able)				00085989
4	Date	5	Payee name					
	07/26/2024		Amazon					
6	Amount (\$)		Payee address; City;	State;	Zip Co	de		
	\$165.61		410 Terry Ave N					
			Seattle, WA 98109					
8	PURPOSE	(a)	Category (See Categories listed at the top of	f this sche	edule)	(b) Description		
	OF EXPENDITURE		Office Overhead/Rental Expense	)				ide of Texas. Complete Schedule T. , officeholder living expense
						Supplies for		
						Supplies for	Cap	bitor Onice
9         Complete ONLY if direct         Candidate/Officeholder name         Office sought         Office held           expenditure to benefit C/OH         Candidate/Officeholder name         Office sought         Office held						Office held		
	Date		Payee name					
	07/30/2024		Amazon					
	Amount (\$)	-	Payee address; City;	State:	Zip Co	de		
	\$259.76		410 Terry Ave N	otato,	2.0 000			
	Ψ235.10							
			Seattle, WA 98109					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Office Overhead/Rental Expense		edule)		in, TX	ide of Texas. Complete Schedule T. , officeholder living expense pitol Office
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder name	C	Dffice sou	ght		Office held
	Date		Payee name					
	08/01/2024		Amazon					
	Amount (\$)		Payee address; City;	State:	Zip Co	de		
	\$246.76		410 Terry Ave N	,				
			Seattle, WA 98109					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Office Overhead/Rental Expense		edule)		in, TX	ide of Texas. Complete Schedule T. , officeholder living expense pitol Office
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense hmittee Legal Services The Instruction Guide explains	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor s how to complete this form.			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 2/7 Rpt: 6/11		Frazier, Frederick E. (The Honorable)				00085989		
4	Date	5	Payee name						
	08/20/2024		Constant Contact						
6	Amount (\$)	7	Payee address; City; State	; Zip Co	de				
	\$55.43		1601 Trapelo Road						
			Waltham, MA 02451						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sc	hedule)	(b) Description				
	OF EXPENDITURE		Advertising Expense				ide of Texas. Complete Schedule T.		
							, officeholder living expense il Marketing Service		
					Campaign Ei	inca			
9     Complete ONLY if direct     Candidate/Officeholder name     Office sought     Office held       expenditure to benefit C/OH     Office name     Office sought     Office held							Office held		
	Date		Payee name						
	08/23/2024		Constant Contact						
	Amount (\$)		Payee address; City; State	; Zip Co	de				
	\$55.43		1601 Trapelo Road						
			Waltham, MA 02451						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sci Advertising Expense	hedule)	(b) Description	outs	ide of Texas. Complete Schedule T.		
	EXPENDITORE		<u> </u>				, officeholder living expense		
					Campaign Er	nai	I Marketing Service		
	Complete <u>ONLY</u> if direct		Candidate/Officeholder name	Office sou	ght		Office held		
	expenditure to benefit C/OF	Π							
	Date		Payee name						
	09/23/2024		Constant Contact						
	Amount (\$)		Payee address; City; State	e; Zip Co	de				
	\$59.70		1601 Trapelo Road						
			Waltham, MA 02451						
-	PURPOSE	(a)	Category (See Categories listed at the top of this sci	hedule)	(b) Description				
	OF	[`'	Advertising Expense		Check if travel		ide of Texas. Complete Schedule T.		
	EXPENDITURE		0				, officeholder living expense		
					Campaign Er	nai	il Marketing Service		
	Complete ONU V if direct	Ĺ	Condidate (Office helder as as	Office	abt		Office hold		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sou	ynt		Office held		
-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains f	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ns how to complete this form.			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME		-	3	Filer ID (Ethics Commission Filers)		
	Sch: 3/7 Rpt: 7/11		Frazier, Frederick E. (The Honorable)				00085989		
4	Date 10/23/2024		Payee name Constant Contact						
6	Amount (\$) \$59.70		Payee address; City; State; 1601 Trapelo Road Waltham, MA 02451	Zip Coo	le				
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Advertising Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Campaign Email Marketing Service</li> </ul> </li> </ul>							
9	9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								
	Date		Payee name						
	11/25/2024		Constant Contact						
	Amount (\$) \$59.70		Payee address; City; State; 1601 Trapelo Road Waltham, MA 02451	Zip Coo	le				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Advertising Expense	edule)	Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense I Marketing Service		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name O	office soug	ht		Office held		
	Date		Payee name						
	12/23/2024		Constant Contact						
	Amount (\$) \$59.70		Payee address; City; State; 1601 Trapelo Road	Zip Co	le				
			Waltham, MA 02451						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Advertising Expense	edule)	Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense I Marketing Service		
ļ	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name O	)ffice sou	ht		Office held		

						2)/ 0/-)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2					2	Filer ID	(Ethics Commission Filers)	
1	Sch: 4/7 Rpt: 8/11	2	Frazier, Frederick E. (The Honorable)				3	00085989		
Δ	Date	5	Payee name							
	08/15/2024	Ū	Dykema Gossett PLLC							
6	Amount (\$)	7	Payee address; City; State	; Zip Co	ode					
	\$2,500.00		1717 Main Street	•						
	+=,000100									
			Suite 4200							
			Dallas, TX 75201							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description				
	OF	. ,	Legal Services	ieuuie)			outsi	de of Texas. Com	nplete Schedule T.	
	EXPENDITURE		Logal Controco			Check if Austin	, тх,	officeholder living	g expense	
						Candidate Le	ega	l Representa	ation	
							-			
9	9       Complete ONLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held							eld		
	Date		Payee name							
	07/01/2024		Executive Press, Inc.							
_	Amount (\$)		Payee address; City; State	; Zip Co	nde					
	.,			, בוף סנ	Juc					
	\$1,715.98		1400 Presidential Dr. Suite 110							
			Richardson, TX 75081							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Printing Expense	nedule)	(b)		, TX,	officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ight			Office he	eld	
	Date		Payee name							
	07/02/2024		Executive Press, Inc.							
				7.0						
	Amount (\$)			; Zip Co	Jue					
	\$2,302.48		1400 Presidential Dr. Suite 110							
			Richardson, TX 75081		-					
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	iedule)	(b)	Description				
	OF EXPENDITURE		Printing Expense						nplete Schedule T.	
	EXPENDITORE					Check if Austin	, тх,	officeholder living	g expense	
						Printing of Ca	amp	baign Materi	ials	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ight			Office he	eld	
	,									

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	· · · · · ·	3 Filer ID (Ethics Commission Filers)			
1	Sch: 5/7 Rpt: 9/11	Frazier, Frederick E. (The Honorable)	00085989			
4	Date	5 Payee name				
	11/01/2024	Gaber, Lois				
6	Amount (\$) \$500.00	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>2824 Roundrock</li> <li>McKinney, TX 75072</li> </ul>				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
0	OF	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Salaries/Wages/Contract Labor</li> <li>(b) Description         Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense         Campaign Contract Labor     </li> </ul>				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	07/12/2024	McKinney Chamber of Commerce				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$200.00	7300 State Hwy 121 McKinney, TX 75070				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense rShip with Candidate Advertisement			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	11/12/2024	McKinney Rotary Club				
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 114 W Louisiana St				
		McKinney, TX 75069				
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense mbership Dues			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment						nent/Reimbursement ead/Rental Expense nse ense ges/Contract Labor	Se Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 6/7 Rpt: 10/11		Frazier, Frederick E. (The Honora	ıble)				00085989	, , , , , , , , , , , , , , , , , , ,
4	Date	5	Payee name						
	11/19/2024		Reddy Offices, LLC						
6	Amount (\$)	7	Payee address; City;	State; Zip	Code	9			
	\$550.00		17350 SH 249						
			Ste 220						
			Houston, TX 77064						
_	DUDDOCE								
8	PURPOSE OF	(a)	Category (See Categories listed at the top of	this schedule)	10	Description	oute	ide of Texas. Com	nlata Schadula T
	EXPENDITURE		Office Overhead/Rental Expense					, officeholder living	
						Campaign St			
						1		5 1 1	
9     Complete ONLY if direct expenditure to benefit C/OH     Candidate/Officeholder name     Office sought     Office held								eld	
	Date		Payee name						
	07/01/2024		Southwest Airlines						
	Amount (\$)	⊢	Payee address; City;	State; Zip	Code	9			
	\$572.20		2702 Love Field Drive						
			Dallas, TX 75235						
	PURPOSE	(a)	Category (See Categories listed at the top of	this schedule)	(k	) Description			
	OF EXPENDITURE		Travel Out of District					ide of Texas. Com	
								, officeholder living	
									end to Official Duties; ravel within Texas
								-	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	-	Candidate/Officeholder name	Office	sough	it		Office he	eld
	Date	_	Payee name						
	11/18/2024		Southwest Airlines						
	Amount (\$)		Payee address; City;	State; Zip	Code	9			
	\$313.98		2702 Love Field Drive						
			Dallas, TX 75235						
	PURPOSE	(a)	Category (See Categories listed at the top of	this schedule)	(ł	) Description			
	OF EXPENDITURE		Travel Out of District					ide of Texas. Com	
								, officeholder living	
									der Duties; Not I Within Texas
						Reinibulseu	IJУ		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office	sough	nt		Office he	eld

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Cabadula E1	
1	Total pages Schedule F1: Sch: 7/7 Rpt: 11/11	2 FILER NAME       3 Filer ID (Ethics Commission Filers)         Frazier, Frederick E. (The Honorable)       00085989
	-	
4	Date 09/30/2024	5 Payee name UPS Store
6	Amount (\$) \$210.00	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>4100 Eldorado Pkwy, Ste 100</li> </ul>
		McKinney, TX 75070
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Office Overhead/Rental Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Campaign PO Box Rental Fee</li> </ul>
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H