FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00085912 3 COMMITTEE NAME **OFFICE USE ONLY** The Future is Now ECISD Date Received **ELECTRONICALLY FILED** 07/14/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 8114 S Foster Rd Date Hand-delivered or Date Postmarked Apt 1 San Antonio, TX 78222 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Chenoa NAME NICKNAME LAST **SUFFIX** Magott STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 8114 S. Foster Road STREET **ADDRESS** #1 (Residence or Business) San Antonio, TX 78222 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 8114 S. Foster Road MAILING **ADDRESS** #1 San Antonio, TX 78222 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 833-1414 PHONE REPORT January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election X July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Year Month Day Month Day COVERED 04/25/2025 **THROUGH** 06/30/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Other Primary Runoff 05/03/2025 χ General Special

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Con	nmission Filers)
The Future is Now ECIS	SD		00085912		
14 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME			
(Attach lists on plain paper to complete this report if necessary.)	Candidate				
report in necessary.	Officeholder	OFFICE SOUGHT (candidate) / OFFICE HELI	O (officeholder)		
X SUPPORT					
(Candidate or Measure)		BALLOT IDENTIFICATION / #		ON DATE	V
OPPOSE (Candidate or Measure)		ECISD Bond	Month 05/03/2	Day 2025	Year
ASSIST	X Measure	DESCRIPTION			
(Officeholder)		Bond in support of building 3 new school	campuses		
15 CONTRIBUTION TOTALS		TRIBUTIONS OF \$50 OR LESS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ILESS ITEMIZED	PLEDGES,	\$	\$0.00
	2. TOTAL POLITICAL C	ONTRIBUTIONS			
	(OTHER THAN PLEDGE	S, LOANS, OR GUARANTEES OF LOANS)		\$	\$3,100.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED PO	DLITICAL EXPENDITURES		\$	\$0.00
	4. TOTAL POLITICAL E	XPENDITURES		\$	\$5,378.93
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CON REPORTING PERIOD	TRIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE	\$	\$10,350.03
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMO DAY OF THE REPORTIN	OUNT OF ALL OUTSTANDING LOANS AS OF T NG PERIOD	HE LAST	\$	\$0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of perjuent and correct and includes all information Title 15, Election Code.			
		Mrs. Cher	oa Magott		
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Car	npaign Treasur	er	
Sworn to and subscribed	before me, by the said	, tr	is the		day
of	, 20, to certify whic	h, witness my hand and seal of office.			
Signature of officer ad	ministering oath Prin	ted name of officer administering oath	Title of office	er administe	ring oath

SUBTOTALS - SPAC

FORM SPAC COVER SHEET PG 3

			3 of 9
17 COMMITTI The Futur	EE NAME e is Now ECISD	18 Filer ID 00085912	(Ethics Commission Filers)
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 100.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. X	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION)R	\$ 3,000.00
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
7.	SCHEDULE E: LOANS		\$
8.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$
9.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
11.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
12. X	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$ 5,378.93
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
14.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

TARY POLITICAL CONTRIB	UTIONS	SCHEDULE A1
action Guide explains how to complete	e this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/9
is Now ECISD	3 Filer ID (Ethics Commission Filers) 00085912	
 Full name of contributor out-of-state P Williams, Arlene Contributor address; City; State; Zip Code 	AC (ID#:)	7 Amount of Contribution (\$) \$100.0
San Antonio, TX 78263		
upation / Job title (See Instructions)	9 Employer (See Instruction	ns)
	is Now ECISD 5 Full name of contributor out-of-state F Williams, Arlene 6 Contributor address; City; State; Zip Code San Antonio, TX 78263	San Antonio, TX 78263 5 Full name of contributor out-of-state PAC (ID#:) Williams, Arlene Out-of-state PAC (ID#:) Out-of-state PAC (ID#:) Out-of-state PAC (ID#:) Out-of-state PAC (ID#:) Out-of-state PAC (ID#:)

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

	The Instruc	cti	on Guide explains how to complete this form.	1	Total pages Schedule C1: Sch: 1/1 Rpt: 5/9
2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	The Future is	s N	low ECISD		00085912
4	Date	5	Corporation / Labor Organization name	7	Amount of contribution (\$)
	05/16/2025		Linebarger		\$3,000.00
		6	Corporation / Labor Organization address; City; State; Zip Code		
			San Antonio, TX 78205		

SCHEDULE H

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	-		ages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule H:	P FILER NAME			3 Filer ID (Ethics Commission File	lers)
	Sch: 1/4 Rpt: 6/9	The Future is Now ECISD			00085912	-
4	Date	Business name				
	06/11/2025	Amazon				
6	Amount (\$)	Business address; City;	State; Zip Coo	le		
	\$305.92	410 Terry Avenue North				
		Seattle, WA 98109				
8	PURPOSE	a) Category (See Categories listed at th	e top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Sche	edule T.
	OF EXPENDITURE	Office filing supplies			Check if Austin, TX, officeholder living expense	
	L/II LIIDII OILL			Office suppli	ies for filing and maintaining records	S
9		Candidate/Officeholder name	Office soug	ht	Office held	
	expenditure to benefit C/OI					
	Date	Business name				
	05/12/2025	Chick-fil-A #3645				
	Amount (\$)	Business address; City;	State; Zip Coo	le		
	\$50.99	3214 SE Military Dr	эшэ, цр ээг	-		
	Ψ00.00	021 : 02 :::a.y				
		San Antonio, TX 78223				
	PURPOSE	a) Category (See Categories listed at th		(b) Description	Check if travel outside of Texas. Complete Sche	edule T.
	OΓ	(See Categories listed at til	e top of this schedule)	b) Description	=	
	OF EXPENDITURE	Food/Beverage Expense	e top of this schedule)		Check if Austin, TX, officeholder living expense	
			e top of this schedule)	Volunteer m	_	
			e top of this schedule)		_	
	EXPENDITURE Complete ONLY if direct		e top of this scriedule) Office soug	Volunteer m	_	
	EXPENDITURE	Food/Beverage Expense	o op or and screedile)	Volunteer m	eal	
	EXPENDITURE Complete ONLY if direct	Food/Beverage Expense	o op or and screedile)	Volunteer m	eal	
	Complete ONLY if direct expenditure to benefit C/Ol	Food/Beverage Expense Candidate/Officeholder name	o op or and screedile)	Volunteer m	eal	
_	Complete ONLY if direct expenditure to benefit C/Ol	Food/Beverage Expense Candidate/Officeholder name Business name	o op or and screedile)	Volunteer m	eal	
_	Complete ONLY if direct expenditure to benefit C/OIDate 04/28/2025	Food/Beverage Expense Candidate/Officeholder name Business name Dollar General	Office soug	Volunteer m	eal	
_	Complete ONLY if direct expenditure to benefit C/Ol Date 04/28/2025 Amount (\$)	Food/Beverage Expense Candidate/Officeholder name Business name Dollar General Business address; City;	Office soug	Volunteer m	eal	
_	Complete ONLY if direct expenditure to benefit C/Ol Date 04/28/2025 Amount (\$)	Food/Beverage Expense Candidate/Officeholder name Business name Dollar General Business address; City; 10940 S US Highway 181	Office soug	Volunteer m	eal	
_	Complete ONLY if direct expenditure to benefit C/OI Date 04/28/2025 Amount (\$) \$120.00	Food/Beverage Expense Candidate/Officeholder name Business name Dollar General Business address; City; 10940 S US Highway 181 San Antonio, TX 78223	Office soug	Volunteer m	eal Office held	
	Complete ONLY if direct expenditure to benefit C/OI Date 04/28/2025 Amount (\$) PURPOSE OF	Food/Beverage Expense Candidate/Officeholder name Business name Dollar General Business address; City; 10940 S US Highway 181 San Antonio, TX 78223 a) Category (See Categories listed at th	Office soug	Volunteer m	eal	
	Complete ONLY if direct expenditure to benefit C/OI Date 04/28/2025 Amount (\$) \$120.00	Food/Beverage Expense Candidate/Officeholder name Business name Dollar General Business address; City; 10940 S US Highway 181 San Antonio, TX 78223	Office soug	Volunteer m tht le (b) Description	Check if travel outside of Texas. Complete Sche	
	Complete ONLY if direct expenditure to benefit C/OI Date 04/28/2025 Amount (\$) PURPOSE OF	Food/Beverage Expense Candidate/Officeholder name Business name Dollar General Business address; City; 10940 S US Highway 181 San Antonio, TX 78223 a) Category (See Categories listed at th	Office soug	Volunteer m tht le (b) Description	eal Office held Check if travel outside of Texas. Complete Sche	
	Complete ONLY if direct expenditure to benefit C/OI Date 04/28/2025 Amount (\$) PURPOSE OF EXPENDITURE	Candidate/Officeholder name Business name Dollar General Business address; City; 10940 S US Highway 181 San Antonio, TX 78223 a) Category (See Categories listed at the Food/Beverage Expense)	Office soug	Volunteer m tht le Snacks/wate	Office held Check if travel outside of Texas. Complete Sche Check if Austin, TX, officeholder living expense er for volunteers	
	Complete ONLY if direct expenditure to benefit C/OI Date 04/28/2025 Amount (\$) PURPOSE OF	Food/Beverage Expense Candidate/Officeholder name Business name Dollar General Business address; City; 10940 S US Highway 181 San Antonio, TX 78223 a) Category (See Categories listed at th	Office soug	Volunteer m tht le Snacks/wate	Check if travel outside of Texas. Complete Sche	
	Complete ONLY if direct expenditure to benefit C/Ol Date 04/28/2025 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Business name Dollar General Business address; City; 10940 S US Highway 181 San Antonio, TX 78223 a) Category (See Categories listed at the Food/Beverage Expense)	Office soug	Volunteer m tht le Snacks/wate	Office held Check if travel outside of Texas. Complete Sche Check if Austin, TX, officeholder living expense er for volunteers	
	Complete ONLY if direct expenditure to benefit C/Ol Date 04/28/2025 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Business name Dollar General Business address; City; 10940 S US Highway 181 San Antonio, TX 78223 a) Category (See Categories listed at the Food/Beverage Expense)	Office soug	Volunteer m tht le Snacks/wate	Office held Check if travel outside of Texas. Complete Sche Check if Austin, TX, officeholder living expense er for volunteers	
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SCHEDULE H

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense 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 in District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services The Instruction Guide		Vages/Contract L mplete this fo		OTHER (enter a	category not listed above)
1	Total pages Schedule H:	2 FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 2/4 Rpt: 7/9		is Now ECISD				00085912	,
4	Date	5 Business nan	ne					
	04/29/2025	Dollar Tree						
6	Amount (\$)	7 Business add	lress; City;	State; Zip Co	ode			
	\$450.00	2031 Goliad	l Rd					
		San Antonio	o, TX 78223					
8	PURPOSE	(a) Category (Se	ee Categories listed at the to	op of this schedule)	(b) Descript			de of Texas. Complete Schedule T.
	OF EXPENDITURE	Polling Expe	ense					officeholder living expense
					Election	neering	gift cards	
9	Complete ONLY if direct	Candidate/Offic	ceholder name	Office sou	ght		Office he	eld
	expenditure to benefit C/OF	1						
	Date	Business nan	ne					
	05/20/2025	H.E.B.						
_	Amount (\$)	Business add	lress: City:	State; Zip Co	nde			
	\$2,009.70	3323 SE Mil	•	Oldic, Zip Oc	, dC			
	Ψ2,003.70	3323 SE WIII	intary Di					
		San Antonic	o, TX 78223					
	PURPOSE	(0) 0-4	ee Categories listed at the to		(h) December	tion \square	Check if travel outsid	de of Texas. Complete Schedule T.
		(a) Category (Se	e Calegories iisleu al life li	op of this schedule)	(b) Descript			•
	OF		/Memorials Expens				Check if Austin, TX,	officeholder living expense
	OF						Check if Austin, TX,	
	OF EXPENDITURE Complete ONLY if direct	Gift/Awards	/Memorials Expen		Electio		Check if Austin, TX,	ft
	OF EXPENDITURE	Gift/Awards	/Memorials Expen	se	Electio		Check if Austin, TX, volunteers gif	ft
	OF EXPENDITURE Complete ONLY if direct	Gift/Awards	/Memorials Expen	se	Electio		Check if Austin, TX, volunteers gif	ft
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh	Gift/Awards, Candidate/Offid	/Memorials Expen	se	Electio		Check if Austin, TX, volunteers gif	ft
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 05/21/2025	Candidate/Offid Business nan H.E.B.	/Memorials Expen: ceholder name ne	Se Office sou	Election		Check if Austin, TX, volunteers gif	ft
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 05/21/2025 Amount (\$)	Candidate/Office Business nan H.E.B. Business add	/Memorials Expensions ceholder name ne	se	Election		Check if Austin, TX, volunteers gif	ft
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 05/21/2025	Candidate/Offid Business nan H.E.B.	/Memorials Expensions ceholder name ne	Se Office sou	Election		Check if Austin, TX, volunteers gif	ft
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 05/21/2025 Amount (\$)	Candidate/Office Business nan H.E.B. Business add 3323 SE Mil	/Memorials Expensions ceholder name ne liress; City; litary Dr	Se Office sou	Election		Check if Austin, TX, volunteers gif	ft
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	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/21/2025 Amount (\$) \$363.55	Candidate/Office Business nan H.E.B. Business add 3323 SE Mil San Antonic (a) Category (See	/Memorials Expensions ceholder name ne lress; City; litary Dr o, TX 78223	Office sou State; Zip Co	ght Descript	neering	Check if Austin, TX, Volunteers gif Office he	de of Texas. Complete Schedule T. officeholder living expense
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	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 05/21/2025 Amount (\$) \$363.55 PURPOSE OF EXPENDITURE	Candidate/Office Business nan H.E.B. Business add 3323 SE Mil San Antonic (a) Category (See Gift/Awards)	ceholder name lress; City; litary Dr o, TX 78223 ee Categories listed at the to	State; Zip Co	ght (b) Descript Election	neering	Check if Austin, TX, Volunteers gif Office he Check if travel outsic Check if Austin, TX, Volunteers gif	de of Texas. Complete Schedule T. officeholder living expense
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SCHEDULE H

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense 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 in District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services The Instruction Guide		Vages/Contract Labor mplete this form.	01	THER (enter a o	category not listed above)	
1	Total pages Schedule H:	2 FILER NAME	Ī			3 Fi	ler ID	(Ethics Commission Filers	5)
	Sch: 3/4 Rpt: 8/9	The Future	is Now ECISD			00	0085912		
4	Date	5 Business nar	me						
	05/21/2025	JVC Media	LLC						
6	Amount (\$)	7 Business add	dress; City;	State; Zip Co	ode				
	\$281.45	9335 Lame	rton						
		San Antonio	o, TX 78250						
8	PURPOSE	(a) Category (Se	ee Categories listed at the to	op of this schedule)	(b) Description	느		de of Texas. Complete Schedul	le T.
	OF EXPENDITURE	Printing Exp	oense			ш	k if Austin, TX,	officeholder living expense	
					Door hange	rs			
9	Complete ONLY if direct		iceholder name	Office sou	ight		Office he	ld	
	expenditure to benefit C/OF	1							
	Date	Business nar	me						
	06/13/2025	JVC Media	LLC						
Н	Amount (\$)	Business add	dress; City;	State; Zip Co	ode				
	\$276.04	9335 Lame		, ,					
	¥=. 3.3								
		C A	- TV 70050						
		San Antonio	o, TX 78250		-				
	PURPOSE	(a) Catagony	ee Categories listed at the to		(b) Description	Check	k if travel outsid	de of Texas. Complete Schedul	lo T
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	OF EXPENDITURE	Printing Exp		op of this schedule)		느	k if Austin, TX,	officeholder living expense	le I.
	OF			op of this schedule)	Yard signs	느	k if Austin, TX,	officeholder living expense	le I.
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	OF EXPENDITURE Complete ONLY if direct	Printing Exp		op of this schedule) Office sou	Yard signs	느	Office he		le 1.
	OF EXPENDITURE	Printing Exp	oense		Yard signs	느			le I.
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=	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 05/21/2025 Amount (\$)	Candidate/Offil Business nar Olive Garde	iceholder name me en dress; City;	Office sou	Yard signs ght	느			le 1.
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SCHEDULE H

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		rel Out of District IER (enter a category not listed above)
1	Total pages Schedule H: Sch: 4/4 Rpt: 9/9		er ID (Ethics Commission Filers) 085912
4	Date 05/21/2025	5 Business name South Texas Sign Solutions	
6	Amount (\$) \$963.43	7 Business address; City; State; Zip Code 10634 Gulfdale Rd Suite 4 San Antonio, TX 78216	
8	PURPOSE OF EXPENDITURE	(See Categories listed at the top of this schedule)	f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH	Office held
	Date 05/21/2025	Business name South Texas Sign Solutions	
	Amount (\$) \$146.85	Business address; City; State; Zip Code 10634 Gulfdale Rd Suite 4 San Antonio, TX 78216	
	PURPOSE OF EXPENDITURE	(See Categories listed at the top of this schedule)	f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense X invoice
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH	Office held
	Date 06/02/2025	Business name	
	00/02/2025	Walmart	
	Amount (\$) \$300.00	Business address; City; State; Zip Code	
	Amount (\$)	Business address; City; State; Zip Code 2100 SE Loop 410 San Antonio, TX 78222 (a) Category (See Categories listed at the top of this schedule) (b) Description Check in	f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense nteers gifts
	Amount (\$) \$300.00 PURPOSE OF	Business address; City; State; Zip Code 2100 SE Loop 410 San Antonio, TX 78222 (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense Candidate/Officeholder name Office sought	f Austin, TX, officeholder living expense