

# 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 (Ethics Commission Filers)	2 Total pages filed: <span style="font-size: 24pt; font-weight: bold;">18</span>																	
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; border-bottom: 1px dashed black;">MS / MRS / MR</td> <td style="width:40%; border-bottom: 1px dashed black;">FIRST</td> <td style="width:20%; border-bottom: 1px dashed black;">MI</td> </tr> <tr> <td>Mr.</td> <td>Todd</td> <td>A</td> </tr> <tr> <td style="border-bottom: 1px dashed black;">NICKNAME</td> <td style="border-bottom: 1px dashed black;">LAST</td> <td style="border-bottom: 1px dashed black;">SUFFIX</td> </tr> <tr> <td></td> <td>LeCompte</td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI	Mr.	Todd	A	NICKNAME	LAST	SUFFIX		LeCompte		<div style="text-align: center; border: 1px solid black; padding: 2px; font-weight: bold;">OFFICE USE ONLY</div> <div style="border: 1px solid black; padding: 2px;">Date Received <span style="font-size: 24pt; color: blue;">10/30/2013</span></div> <div style="border: 1px solid black; padding: 2px; margin-top: 10px;">Date Hand-delivered or Date Postmarked</div> <table style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width:50%; border-bottom: 1px solid black;">Receipt #</td> <td style="width:50%; border-bottom: 1px solid black;">Amount \$</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Date Processed</td> <td></td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Date Imaged</td> </tr> </table>	Receipt #	Amount \$	Date Processed		Date Imaged	
MS / MRS / MR	FIRST	MI																		
Mr.	Todd	A																		
NICKNAME	LAST	SUFFIX																		
	LeCompte																			
Receipt #	Amount \$																			
Date Processed																				
Date Imaged																				
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">ADDRESS / PO BOX;</td> <td style="width:15%;">APT / SUITE #;</td> <td style="width:15%;">CITY;</td> <td style="width:15%;">STATE;</td> <td style="width:25%;">ZIP CODE</td> </tr> <tr> <td>19218 Water Bridge Dr.</td> <td></td> <td>Cypress, Tx</td> <td></td> <td>77433</td> </tr> </table>	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	19218 Water Bridge Dr.		Cypress, Tx		77433									
ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE																
19218 Water Bridge Dr.		Cypress, Tx		77433																
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">AREA CODE</td> <td style="width:40%;">PHONE NUMBER</td> <td style="width:40%;">EXTENSION</td> </tr> <tr> <td>(713 )</td> <td>263-1600</td> <td></td> </tr> </table>	AREA CODE	PHONE NUMBER	EXTENSION	(713 )	263-1600														
AREA CODE	PHONE NUMBER	EXTENSION																		
(713 )	263-1600																			
<b>6 CAMPAIGN TREASURER NAME</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; border-bottom: 1px dashed black;">MS / MRS / MR</td> <td style="width:40%; border-bottom: 1px dashed black;">FIRST</td> <td style="width:20%; border-bottom: 1px dashed black;">MI</td> </tr> <tr> <td>Mrs.</td> <td>Monica</td> <td>L</td> </tr> <tr> <td style="border-bottom: 1px dashed black;">NICKNAME</td> <td style="border-bottom: 1px dashed black;">LAST</td> <td style="border-bottom: 1px dashed black;">SUFFIX</td> </tr> <tr> <td></td> <td>Dean</td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI	Mrs.	Monica	L	NICKNAME	LAST	SUFFIX		Dean								
MS / MRS / MR	FIRST	MI																		
Mrs.	Monica	L																		
NICKNAME	LAST	SUFFIX																		
	Dean																			
<b>7 CAMPAIGN TREASURER ADDRESS</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:15%;">APT / SUITE #;</td> <td style="width:15%;">CITY;</td> <td style="width:10%;">STATE;</td> <td style="width:10%;">ZIP CODE</td> </tr> <tr> <td>9212 Fry Rd., Suite 105, #333</td> <td></td> <td>Cypress, Tx</td> <td></td> <td>77433</td> </tr> </table>	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE	9212 Fry Rd., Suite 105, #333		Cypress, Tx		77433									
STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE																
9212 Fry Rd., Suite 105, #333		Cypress, Tx		77433																
<b>8 CAMPAIGN TREASURER PHONE</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">AREA CODE</td> <td style="width:40%;">PHONE NUMBER</td> <td style="width:40%;">EXTENSION</td> </tr> <tr> <td>(713 )</td> <td>263-1600</td> <td></td> </tr> </table>	AREA CODE	PHONE NUMBER	EXTENSION	(713 )	263-1600														
AREA CODE	PHONE NUMBER	EXTENSION																		
(713 )	263-1600																			
<b>9 REPORT TYPE</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input checked="" type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded Modified Reporting Limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>	<input type="checkbox"/> January 15	<input 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 checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)											
<input type="checkbox"/> January 15	<input 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 checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)																	
<b>10 PERIOD COVERED</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">Month</td> <td style="width:10%;">Day</td> <td style="width:20%;">Year</td> <td style="width:20%; text-align: center;">THROUGH</td> <td style="width:10%;">Month</td> <td style="width:10%;">Day</td> <td style="width:20%;">Year</td> </tr> <tr> <td>9</td> <td>29</td> <td>23</td> <td></td> <td>10</td> <td>30</td> <td>23</td> </tr> </table>	Month	Day	Year	THROUGH	Month	Day	Year	9	29	23		10	30	23					
Month	Day	Year	THROUGH	Month	Day	Year														
9	29	23		10	30	23														
<b>11 ELECTION</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">ELECTION DATE</td> <td colspan="3">ELECTION TYPE</td> </tr> <tr> <td>Month    Day    Year</td> <td>Primary</td> <td>Runoff</td> <td>Other Description</td> </tr> <tr> <td>11 / 7 / 23</td> <td><input checked="" type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>	ELECTION DATE	ELECTION TYPE			Month    Day    Year	Primary	Runoff	Other Description	11 / 7 / 23	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special								
ELECTION DATE	ELECTION TYPE																			
Month    Day    Year	Primary	Runoff	Other Description																	
11 / 7 / 23	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special																		
<b>12 OFFICE</b>	OFFICE HELD (if any)	<b>13 OFFICE SOUGHT</b> (if known)																		
<b>14 NOTICE FROM POLITICAL COMMITTEE(S)</b>	<p style="font-size: 8pt; margin: 0;">THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; border-bottom: 1px solid black;">COMMITTEE TYPE</td> <td style="border-bottom: 1px solid black;">COMMITTEE NAME</td> </tr> <tr> <td style="border-bottom: 1px solid black;">GENERAL</td> <td style="border-bottom: 1px solid black;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="border-bottom: 1px solid black;">SPECIFIC</td> <td style="border-bottom: 1px solid black;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td style="border-bottom: 1px solid black;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>		COMMITTEE TYPE	COMMITTEE NAME	GENERAL	COMMITTEE ADDRESS	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS										
COMMITTEE TYPE	COMMITTEE NAME																			
GENERAL	COMMITTEE ADDRESS																			
SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME																			
	COMMITTEE CAMPAIGN TREASURER ADDRESS																			

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

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

<b>15 C/OH NAME</b>		<i>Todd A. LeCompte</i>	<b>16 Filer ID (Ethics Commission Filers)</b>
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ - 0 -
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 13,240.30
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$ - 0 -
	4. TOTAL POLITICAL EXPENDITURES		\$ 9,575.87
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		\$ - 0 -
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 6,700.00

**18 SIGNATURE** 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.

*T. LeCompte*

Signature of Candidate or Officeholder

**Please complete either option below:**



**(1) Affidavit**

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Todd A. LeCompte this the 30 day of October, 2023, to certify which, witness my hand and seal of office.

Daphne Macias Yarrish Daphne Macias Yarrish Notary  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

**FORM C/OH  
COVER SHEET PG 3**

19 FILER NAME <i>Todd A. LeCompte</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>2,475.00</i>
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>10,765.30</i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ <i>6,700.00</i>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>9,575.87</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>5</b>
2 FILER NAME <b>Todd A. LeCompte</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>10/03/23</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Chris LeCompte</b>	7 Amount of contribution (\$) <b>\$100.00</b>
6 Contributor address; City; State; Zip Code <b>7423 Cypress Pin Oak Cypress Tx 77433</b>		
8 Principal occupation / Job title (See Instructions) <b>General Manager</b>		9 Employer (See Instructions) <b>TNT Home Commercial Svcs</b>
Date <b>10/03/23</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Anthony LeCompte</b>	Amount of contribution (\$) <b>\$250.00</b>
Contributor address; City; State; Zip Code <b>25511 Dappled Filly Dr. Tomball Tx 77375</b>		
Principal occupation / Job title (See Instructions) <b>Chief Engineer</b>		Employer (See Instructions) <b>Avison Young</b>
Date <b>10/03/23</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Judy Mueller</b>	Amount of contribution (\$) <b>\$150.00</b>
Contributor address; City; State; Zip Code <b>10138 Rustic Bend Ct. Houston Tx 77064</b>		
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions)
Date <b>10/03/23</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Charmaine LeCompte</b>	Amount of contribution (\$) <b>\$25.00</b>
Contributor address; City; State; Zip Code <b>16523 Aberdeen Green Dr. Houston Tx 77095</b>		
Principal occupation / Job title (See Instructions) <b>Commission Specialist</b>		Employer (See Instructions) <b>TNT</b>

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Todd A. LeCompte</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>10/03/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Tim LeCompte</i>	7 Amount of contribution (\$)  <i>\$250.00</i>
6 Contributor address; City; State; Zip Code <i>16834 Highland Country Dr. Cypress Tx 77433</i>		
8 Principal occupation / Job title (See Instructions) <i>Sales</i>		9 Employer (See Instructions) <i>TNT Outsourcing</i>
Date <i>10/03/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jose Pedraza</i>	Amount of contribution (\$)  <i>\$25.00</i>
Contributor address; City; State; Zip Code <i>10706 Barker View Dr. Cypress Tx 77433</i>		
Principal occupation / Job title (See Instructions) <i>Sales</i>		Employer (See Instructions) <i>Buzz Tees</i>
Date <i>10/03/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Cody LeCompte</i>	Amount of contribution (\$)  <i>\$25.00</i>
Contributor address; City; State; Zip Code <i>16523 Aberdeen Green Dr. Houston Tx 77095</i>		
Principal occupation / Job title (See Instructions) <i>Paralegal</i>		Employer (See Instructions) <i>Thompson Coe</i>
Date <i>10/04/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Leon Rendon</i>	Amount of contribution (\$)  <i>\$100.00</i>
Contributor address; City; State; Zip Code <i>16922 Ranger Ridge Dr. Cypress Tx 77429</i>		
Principal occupation / Job title (See Instructions) <i>Sales</i>		Employer (See Instructions) <i>LGI Homes</i>

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Todd A. LeCompte</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>10/05/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>William Ely</i>	7 Amount of contribution (\$) <i>\$500.00</i>
6 Contributor address; City; State; Zip Code <i>20715 Orange Poppy Dr. Cypress Tx 77433</i>		
8 Principal occupation / Job title (See Instructions) <i>Account Executive</i>		9 Employer (See Instructions) <i>SAP Americas</i>
Date <i>10/05/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Lorrie Magee</i>	Amount of contribution (\$) <i>\$100.00</i>
Contributor address; City; State; Zip Code <i>115 Deer Lake Rd. Huffman Tx 77336</i>		
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions)
Date <i>10/10/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Daniel Hickman</i>	Amount of contribution (\$) <i>\$100.00</i>
Contributor address; City; State; Zip Code <i>12431 Cove Springs Dr. Cypress Tx 77433</i>		
Principal occupation / Job title (See Instructions) <i>President</i>		Employer (See Instructions) <i>Altiras</i>
Date <i>10/10/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Steve Bluestein</i>	Amount of contribution (\$) <i>\$100.00</i>
Contributor address; City; State; Zip Code <i>P.O. Box 841876 Houston Tx 77284</i>		
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Todd A. LeCompte</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>10/10/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Cecilia Adams</i>	7 Amount of contribution (\$)  <i>\$ 100.00</i>
6 Contributor address; City; State; Zip Code <i>1711 Briarpark Dr Houston Tx 77042</i>		
8 Principal occupation / Job title (See Instructions) <i>RN</i>		9 Employer (See Instructions) <i>Memorial Hermann</i>
Date <i>10/21/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kurt Snell</i>	Amount of contribution (\$)  <i>\$ 25.00</i>
Contributor address; City; State; Zip Code <i>14202 Scenic Path Ct. Cypress Tx 77429</i>		
Principal occupation / Job title (See Instructions) <i>Carpenter</i>		Employer (See Instructions) <i>Self-employed</i>
Date <i>10/23/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Monica Dean</i>	Amount of contribution (\$)  <i>\$ 100.00</i>
Contributor address; City; State; Zip Code <i>9212 Fry Rd., Ste 105, #333 Cypress Tx 77433</i>		
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions)
Date <i>10/24/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Matthew Faith</i>	Amount of contribution (\$)  <i>\$ 25.00</i>
Contributor address; City; State; Zip Code <i>20922 Golden Sycamore Trl. Cypress Tx 77433</i>		
Principal occupation / Job title (See Instructions) <i>Production Planning Mgr</i>		Employer (See Instructions) <i>PCCA</i>

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Todd A. LeCompte</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>10/23/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Joseph Pantoja</i>	7 Amount of contribution (\$) <i>\$500.00</i>
6 Contributor address; City; State; Zip Code <i>29415 Imperial Creek Dr. Tomball Tx 77377</i>		
8 Principal occupation / Job title (See Instructions) <i>Realtor</i>		9 Employer (See Instructions) <i>Pantoja Properties</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <b>8</b>	
2 FILER NAME <b>Todd A. LeCompte</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>9/30/23</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>CyFair 4 Liberty PAC</b>	8 Amount of Contribution \$ <b>\$162.50</b>	9 In-kind contribution description <b>Yard Sign Delv. SVC</b>
7 Contributor address; City; State; Zip Code <b>13121 Lovetta Rd #155 Cypress Tx 77429</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <b>9/30/23</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>CyFair 4 Liberty PAC</b>	Amount of Contribution \$ <b>\$50.00</b>	In-kind contribution description <b>Yard Sign Delv. SVC.</b>
Contributor address; City; State; Zip Code <b>13121 Lovetta Rd. #155 Cypress Tx 77429</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

--	--	--	--

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <i>Todd A. LeCompte</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>10/01/23</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>CyFair 4 Liberty PAC</i>	8 Amount of Contribution \$ <i>\$136.43</i>	9 In-kind contribution description <i>Data Svcs.</i>
7 Contributor address; City; State; Zip Code <i>13121 Lovetta Rd #155 Cypress Tx 77429</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date <i>10/01/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>CyFair 4 Liberty PAC</i>	Amount of Contribution \$ <i>\$117.06</i>	In-kind contribution description <i>Mktg. Svc.</i>
Contributor address; City; State; Zip Code <i>13121 Lovetta Rd #155 Cypress Tx 77429</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <i>Todd A. LeCompte</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>10/03/23</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>CyFair 4 Liberty PAC</i>	8 Amount of Contribution \$ <i>\$105.27</i>	9 In-kind contribution description <i>Mktg Materials</i>
7 Contributor address; City; State; Zip Code <i>13121 Lovetta Rd. #155 Cypress Tx 77429</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date <i>10/03/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>CyFair 4 Liberty PAC</i>	Amount of Contribution \$ <i>\$487.58</i>	In-kind contribution description <i>Mktg. Materials</i>
Contributor address; City; State; Zip Code <i>13121 Lovetta Rd #155 Cypress Tx 77429</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <i>Todd A. LeCompte</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>10/10/23</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>CyFair 4 Liberty PAC</i>	8 Amount of Contribution \$ <i>\$43.28</i>	9 In-kind contribution description <i>Mktg. Materials</i>
7 Contributor address; City; State; Zip Code <i>13121 Lovetta Rd #155 Cypress Tx 77429</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date <i>10/10/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>CyFair 4 Liberty PAC</i>	Amount of Contribution \$ <i>\$3,999.25</i>	In-kind contribution description <i>Mktg. Materials</i>
Contributor address; City; State; Zip Code <i>13121 Lovetta Rd #155 Cypress Tx 77429</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <i>Todd A. LeCompte</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>10/13/23</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>CyFair 4 Liberty PAC</i>	8 Amount of Contribution \$ <i>\$3,999.25</i>	9 In-kind contribution description <i>Mktg. Materials</i>
7 Contributor address; City; State; Zip Code <i>13121 Loretta Rd #155 Cypress Tx 77429</i>		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date <i>10/16/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>CyFair 4 Liberty PAC</i>	Amount of Contribution \$ <i>\$501.55</i>	In-kind contribution description <i>Mktg. Materials</i>
Contributor address; City; State; Zip Code <i>13121 Loretta Rd #155 Cypress Tx 77429</i>		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	8 Amount of Contribution \$	9 In-kind contribution description
10/17/23	CyFair 4 Liberty PAC	\$105.27	Mktg. Materials
7 Contributor address; City; State; Zip Code		Check if travel outside of Texas. Complete Schedule T.	
13121 Lovetta Rd #155, Cypress Tx 77429			
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
10/17/23	CyFair 4 Liberty PAC	\$58.56	Mktg. Materials
Contributor address; City; State; Zip Code		Check if travel outside of Texas. Complete Schedule T.	
13121 Lovetta Rd #155, Cypress Tx 77429			
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/18/23	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CyFair 4 Liberty PAC 7 Contributor address; City; State; Zip Code 13121 Lovetta Rd #155, Cypress Tx 77429	8 Amount of Contribution \$ \$14.06	9 In-kind contribution description Mktg. Materials
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date 10/20/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CyFair 4 Liberty PAC Contributor address; City; State; Zip Code 13121 Lovetta Rd #155, Cypress Tx 77429	Amount of Contribution \$ \$92.68	In-kind contribution description Mktg. Materials
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

--	--	--	--

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <i>Todd A. LeCompte</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>10/22/23</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>CyFair 4 Liberty PAC</i>	8 Amount of Contribution \$ <i>\$865.00</i>	9 In-kind contribution description <i>Mktg. Materials</i>
7 Contributor address; City; State; Zip Code <i>13121 Lovetta Rd #155, Cypress Tx 77429</i>		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <i>10/24/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>CyFair 4 Liberty PAC</i>	Amount of Contribution \$ <i>\$27.56</i>	In-kind contribution description <i>Mktg Materials</i>
Contributor address; City; State; Zip Code <i>13121 Lovetta Rd #155 Cypress Tx 77429</i>		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.



**LOANS**

**SCHEDULE E**

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: <b>1</b>
2 FILER NAME <i>Todd A. LeCompte</i>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ <b>6,700.00</b>
5 Date of loan <i>10/24/23</i>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) <i>Todd A. LeCompte</i>	9 Loan Amount (\$) <b>\$5,000.00</b>
6 Is lender a financial Institution?  Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code  <i>19218 Water Bridge Dr. Cypress Tx 77433</i>	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan <i>10/24/23</i>	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) <i>Todd A. LeCompte</i>	Loan Amount (\$) <b>\$1,700.00</b>
Is lender a financial Institution?  Y <input checked="" type="radio"/> N	Lender address; City; State; Zip Code  <i>19218 Water Bridge Dr. Cypress Tx 77429</i>	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If lender is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME <i>Todd A. LeCompte</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>10/19/23</i>	<b>5</b> Payee name <i>Fed Ex</i>	
<b>6</b> Amount (\$) <i>\$51.52</i>	<b>7</b> Payee address; City; State; Zip Code <i>12361 Barker Cypress Rd Ste 200 Cypress Tx 77429</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>	<b>(b)</b> Description <i>Candidate Push Cards</i>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <i>10/20/23</i>	Payee name <i>CyFair 4 Liberty PAC</i>	
Amount (\$) <i>\$1,624.35</i>	Payee address; City; State; Zip Code <i>13121 Loretta Rd. #155 Cypress Tx 77429</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Marketing Materials</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <i>10/25/23</i>	Payee name <i>CyFair 4 Liberty PAC</i>	
Amount (\$) <i>\$7,900.00</i>	Payee address; City; State; Zip Code <i>13121 Loretta Rd #155 Cypress Tx 77429</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Marketing Materials</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED