

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed:
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mrs. Frances R	<div style="border: 2px solid blue; padding: 5px; display: inline-block;"> <b>RECEIVED</b>              10:50 Am  <b>OCT 10 2023</b>              BY: <i>[Signature]</i> </div>	
	NICKNAME LAST SUFFIX Romero		
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7710-T Cherry Park Drive, #373 Houston, Texas 77095		
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (281 ) 413-3726		
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Alexandra M	Date Received	
	NICKNAME LAST SUFFIX Romero	Date Hand-delivered or Date Postmarked	
<b>7</b> CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2601 Westheimer Road, #C719 Houston, Texas 77098		Receipt # Amount \$
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION ( 832 ) 506-2507	Date Processed <b>10/10/2023</b>	
<b>9</b> REPORT TYPE	Date Imaged <i>[Signature]</i>		
<input type="checkbox"/> January 15	<input checked="" 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 type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)
<b>10</b> PERIOD COVERED	Month Day Year 7 / 1 / 23	THROUGH	Month Day Year 9 / 28 / 23
<b>11</b> ELECTION	ELECTION DATE Month Day Year 11 / 7 / 23		ELECTION TYPE Primary Runoff Other Description <input checked="" type="checkbox"/> General Special
	<b>12</b> OFFICE OFFICE HELD (if any)		<b>13</b> OFFICE SOUGHT (if known) Cy-Fair ISD School Board Trustee - Position 4
<b>14</b> NOTICE FROM POLITICAL COMMITTEE(S)  Additional Pages	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.		
	COMMITTEE TYPE	COMMITTEE NAME ALL4CFISD	
	GENERAL	COMMITTEE ADDRESS 6340 N Eldridge Pkwy., Ste. N #402 Houston, Tx 77041	
	<input checked="" type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME Daniel Arizpe	
		COMMITTEE CAMPAIGN TREASURER ADDRESS 8910 English Manor Dr. Cypress, Tx 77433	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

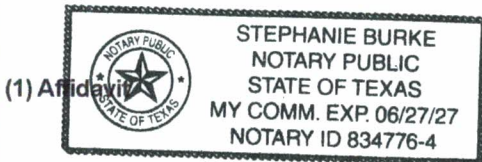
<b>15 C/OH NAME</b> Frances Ramirez Romero		<b>16 Filer ID</b> (Ethics Commission Filers)
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 863.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,961.03
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 121.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,197.83
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,772.10
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

**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.

*Frances R Romero*

Signature of Candidate or Officeholder

Please complete either option below:



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Frances R Romero this the 10<sup>th</sup> day of October, 2023, to certify which, witness my hand and seal of office.

Stephanie Burke Signature of officer administering oath  
Stephanie Burke Printed name of officer administering oath  
Notary 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\_\_\_\_.

Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

Frances Ramirez Romero

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,430.11
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 1,197.83
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	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:

2 FILER NAME

Frances Ramirez Romero

3 Filer ID (Ethics Commission Filers)

4 Date

07/24/2023

5 Full name of contributor

Michael Wilson

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address;

City;

State;

Zip Code

7331 Haley Woods Ct. Houston, Tx 77095

7 Amount of contribution (\$)

23.70

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/27/2023

Full name of contributor

Danielle McCraw

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

19415 Timpson Reservoir Dr. Cypress, Tx 77433

Amount of contribution (\$)

104.48

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/01/2023

Full name of contributor

Terry LaTouf

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

21026 Camberwell Beauty Ln. Cypress, Tx 77433

Amount of contribution (\$)

95.70

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/03/2023

Full name of contributor

Rebecca Robles

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

2704 Twinpost Court Irving, Tx 75062

Amount of contribution (\$)

104.48

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.

# 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

Frances Ramirez Romero

3 Filer ID (Ethics Commission Filers)

4 Date

08/08/2023

5 Full name of contributor

Mindi Meyer

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address;

City;

State;

Zip Code

10419 Comanche Springs Ct. Houston, Tx 77095

7 Amount of contribution (\$)

104.48

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/09/2023

Full name of contributor

Iris Haze

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

7430 Pleasant Ridge Dr. Houston, Tx 77095

Amount of contribution (\$)

15.94

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/04/2023

Full name of contributor

Rebecca Robles

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

2704 Twinpost Court Irving, Tx 75062

Amount of contribution (\$)

104.48

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/09/2023

Full name of contributor

Iris Haze

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

7430 Pleasant Ridge Dr. Houston, Tx 77095

Amount of contribution (\$)

15.94

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.

# 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 <b>Frances Ramirez Romero</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>09/18/2023</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>Laura Backs</b> ..... 6 Contributor address; City; State; Zip Code <b>15103 Runbell Rd. Houston, Tx 77095</b>	7 Amount of contribution (\$)  <b>260.73</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <b>09/18/2023</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Justin Sarabia</b> ..... Contributor address; City; State; Zip Code <b>5815 Orchard Spring Ct. Pearland, Tx 77581</b>	Amount of contribution (\$)  <b>95.70</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>09/18/2023</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Richard Sarabia</b> ..... Contributor address; City; State; Zip Code <b>5215 McCormick Houston, Tx 77023</b>	Amount of contribution (\$)  <b>104.48</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>07/06/2023</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Frances Ramirez Romero</b> ..... Contributor address; City; State; Zip Code <b>7710-T Cherry Park, #373 Houston, Tx 77095</b>	Amount of contribution (\$)  <b>150.00</b>
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.

# 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

Frances Ramirez Romero

3 Filer ID (Ethics Commission Filers)

4 Date

08/29/2023

5 Full name of contributor

Bob Covey

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address;

City;

State;

Zip Code

17110 Ledgefield Cypress, Tx 77433

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

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.

# 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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Frances Ramirez Romero	<b>3</b> Filer ID (Ethics Commission Filers)
-----------------------------------	---	--

<b>4</b> Date 08/01/2023	<b>5</b> Payee name KP21 Productions
-----------------------------	---

<b>6</b> Amount (\$) <b>750.00</b>	<b>7</b> Payee address; City; State; Zip Code 3615 Danbury Run Dr. Houston, Tx 77041
---------------------------------------	---

<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/wages/contract labor	<b>(b)</b> Description Campaign Manager Services for June & July 2023
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Frances Ramirez Romero	Office sought CFISD School Board Trustee	Office held
---	---	---	-------------

Date 08/28/2023	Payee name KP21 Productions
--------------------	--------------------------------

Amount (\$) <b>375.00</b>	Payee address; City; State; Zip Code 3615 Danbury Run Dr. Houston, Tx 77041
------------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/wages/contract labor	Description Campaign Manager Service for August 2023
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Frances Ramirez Romero	Office sought CFISD School Board Trustee	Office held
--	---	---	-------------

Date 09/28/2023	Payee name Anedot
--------------------	----------------------

Amount (\$) <b>72.83</b>	Payee address; City; State; Zip Code 1920 McKinney Ave, 7th Floor Dallas, Tx 75201
-----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Cumulative fees for all online transactions up to 09/28/2023
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Frances Ramirez Romero	Office sought CFISD School Board Trustee	Office held
--	---	---	-------------

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