

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	2 Total pages filed: 8
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST elizabeth	MI MI
	NICKNAME		SUFFIX
785 W. Wheatland Rd. Ste. 168 Duncanville, TX 77116		Date Hand-delivered or Date Postmarked	
<input type="checkbox"/> Change of Address		Receipt #	
Date Hand-delivered or Date Postmarked		Date Processed	
Date Hand-delivered or Date Postmarked		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Kevin	MI MI
	NICKNAME		SUFFIX
785 W. Wheatland Rd. Ste. 168 Duncanville, Texas 77116		Date Hand-delivered or Date Postmarked	
Date Hand-delivered or Date Postmarked		Date Processed	
Date Hand-delivered or Date Postmarked		Date Imaged	
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
8 REPORT TYPE	<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 checked="" 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)		
9 PERIOD COVERED	Month	Day	Year
02/20/2022		THROUGH	
06/30/2022			
10 ELECTION	ELECTION DATE		ELECTION TYPE
Month		Day	Year
03/01/2022		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)
		District Attorney	

FILED
 2022 JUL 12 PM 2:57
 COUNTY CLERK
 DALLAS COUNTY
 DEPUTY

GO TO PAGE 2

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

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

2 of 8

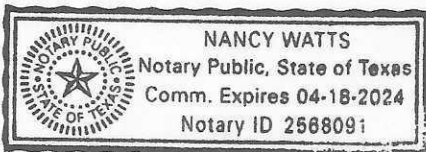
13 C / OH NAME frizell, elizabeth	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.									
<table style="width:100%"> <tr> <td style="width:30%">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS		
	COMMITTEE TYPE	COMMITTEE NAME								
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS								
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE CAMPAIGN TREASURER ADDRESS									

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	200.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,585.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	110.00
	4. TOTAL POLITICAL EXPENDITURES	\$	15,445.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

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.



AFFIX NOTARY STAMP / SEAL ABOVE

Elizabeth Frizell
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Elizabeth Frizell, this the 11th day of July, 2022, to certify which, witness my hand and seal of office.

Nancy Watts Signature of officer administering Nancy Watts Printed name of officer administering Notary Public Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME frizell, elizabeth		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,585.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 15,445.00
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/8
2 FILER NAME frizell, elizabeth		3 Filer ID
4 Date 02/23/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brunson, Jo Anne	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 8328 Mountainview Dr. Dallas, TX 75249		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Retired
Date 02/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis , Kevin	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 4801 Frankford Rd. Dallas, TX 75287		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) State Farm Insurance
Date 03/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frizell, Elizabeth	Amount of Contribution (\$) \$235.00
Contributor address; City; State; Zip Code 785 W. Wheatland Rd. Ste. 168 Duncanville, TX 75116		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Frizell Firm
Date 02/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Jeff	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 517 Palo Duro Cir. Desoto, TX 75115		
Principal occupation / Job title (See Instructions) Pharmaceutical Sales		Employer (See Instructions)
Date 02/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh , Myrya	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 1910 Pacific Ave. Ste. 8000 Dallas, TX 75201		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) McIntosh & Ward

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/4 Rpt: 5/8	2 FILER NAME frizell, elizabeth	3 Filer ID
4 Date 03/01/2022	5 Payee name Community Action	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 2349 Cedar Crest Dallas, TX 75203	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field Operation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/22/2022	Payee name Community Action	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 2349 Cedar Crest Dallas, TX 75203	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field Operation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/28/2022	Payee name Espy Sports Group	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 4206 Goodfellow Dr. Dallas, TX 75229	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Community PR
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/4 Rpt: 6/8		2 FILER NAME frizell, elizabeth		3 Filer ID	
4 Date 03/15/2022		5 Payee name Espy Sports Group			
6 Amount (\$) \$1,500.00		7 Payee address; City; State; Zip Code 4206 Goodfellow Dr. Dallas, TX 75229			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Community/PR	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/22/2022		Payee name Lamar Companies			
Amount (\$) \$650.00		Payee address; City; State; Zip Code P. O. Box 96030 Baton Rouge, LA 70896			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Billboard	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/25/2022		Payee name Pelican House			
Amount (\$) \$2,350.00		Payee address; City; State; Zip Code 107 S. Cedar Ridge Dr. Duncanville, TX 75116			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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.

1 Total pages Schedule F1: Sch: 3/4 Rpt: 7/8	2 FILER NAME frizell, elizabeth	3 Filer ID
4 Date 03/08/2022	5 Payee name Show Your Logo	
6 Amount (\$) \$135.00	7 Payee address; City; State; Zip Code 422 Treasure Dr. Oswego, IL 60543	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Car Magnets
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/01/2022	Payee name Southwest Mobile Advertising	
Amount (\$) \$1,200.00	Payee address; City; State; Zip Code 204 E. Pleasant Run Rd. Lancaster, TX 75146	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mobile Billboard
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/01/2022	Payee name The Political Arm	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 8606 Turtle Creek Blvd. #12484 Dallas, TX 75225	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media/PR
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/4 Rpt: 8/8	2 FILER NAME frizell, elizabeth		3 Filer ID
4 Date 04/01/2022	5 Payee name The Political Arm		
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 8606 Turtle Creek Blvd. #12484 Dallas, TX 75225		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PR/e-mail mrktg.	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate/Officeholder name		Office sought	Office held