CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** The C/OH Instruction Guide explains how to complete this form. Filer ID Total pages filed: CANDIDATE / MS/MRS/MR FIRST OFFICEHOLDER MI OFFICE USE ONLY elizabeth NAME Date Received **NICKNAME** LAST SUFFIX frizell CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-pelivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 785 W. Wheatland Rd. MAILING **ADDRESS** Ste. 168 Receipt # Amount U Change of Address Duncanville, TX 77116 Date Processe Date Imaged CAMPAIGN MS/MRS/MR FIRST MI TREASURER Kevin Davis NAME **NICKNAME** SUFFIX CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY: **TREASURER** STATE; ZIP CODE 785 W. Wheatland Rd. **ADDRESS** Ste. 168 (Residence or Business) Duncanville, Texas 77116 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION **TREASURER** PHONE REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit **PERIOD** Month Day Year Day Month COVERED Year 07/01/2022 THROUGH 11/16/2022 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year X Primary Runoff Other 03/01/2022 General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) Criminal District Attorney District Dallas **GO TO PAGE 2** Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.eb87ef42

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

12 C / CU NAME				2 of 4
13 C / OH NAME	frizell, elizabeth	14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	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			
Additional Pages	COMMITTEE TYPE COMMITTEE NAME GENERAL			
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME	**************************************	
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS	TOTAL UNITEM OR GUARANTE	IZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOA ES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	NS, \$	0.00
	2. TOTAL POLITIC (OTHER THAN F	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		0.00
		IZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE RIOD	\$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP. OF THE REPORT	AL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY TING PERIOD	\$	0.00
17 AFFIDAVIT	JUSTIN SLOAN Notary Public, State of Comm. Expires 10 23 Notary ID 1327450	I swear, or affirm, under penalty of perjury, that the true and correct and includes all information require under Title 15, Election Code. Signature of Candidate or Office	ed to be reported b	port is by me
Sworn to and subsc		id Elizabeth Frizol this the	17	day
of \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	3862	Printed name of officer administering Title of officer	CARLO	oath

		FORM	C/OH - FR	
	The Instruction Guide explains how to complete this form. ** Complete only if "Report Type" on page 1 is marked "Final Report" **			
1	1 C/OH NAME		Page 4 of 4	
	frizell, elizabeth	2 Filer ID		
3	3 SIGNATURE	elizabethfrizell@at	t.net	
	I do not expect any further political contributions or political expenditures in connection with my candidates a final report terminates my campaign treasurer appointment. I also understand that I may not accept campaign expenditures without a campaign treasurer appointment on file.	andidacy. I understand that designating a report accept any campaign contributions or make any		
		didate / Officeholder		
4	4 FILER WHO IS NOT AN OFFICEHOLDER			
	** Complete A & B below only if you are not an officeholder **			
	A CAMPAIGN FUNDS			
	Check only one:			
	I do not have unexpended contributions or unexpended interest or income earned from political			
	I have unexpended contributions or unexpended interest or income earned from political contributions or unexpended interest or income earned from political contributions or unexpended interest or income earned on political understand that I must file an annual report of unexpended contributions and that I may not retar unexpended interest or income earned on political contributions longer than six years after filing must dispose of unexpended political contributions and unexpended interest or income earned or with the requirements of Election Code 254.204.	butions. I understand that contributions to personain unexpended contribu	onal use. I also outions or	
	B ASSETS			
	Check only one:			
	X I do not retain assets purchased with political contributions or interest or other income from politi	tical contributions.		
	I do retain assets purchased with political contributions or interest or other income from political convert assets purchased with political contributions or interest or other income from political conunderstand that I must dispose of assets purchased with political contributions in accordance with 254,204.	I contrubutions. I unders	stand that I may not use. I also Election Code,	
	X Ethipell signature of	f Candidate		
	OFFICEHOLDER			
	** Complete this section only if you are an officeholder ** I am aware that I remain subject to filing requirements applicable to an officeholder who does not also aware that I will be required to file reports of unexpended contributions if, after filing the last retain political contributions, interest or other income from political contributions, or assets purchainterest or other income from political contributions.	nt have a campaign trea required report as an c rased with political cont	surer on file. I am officeholder, I ributions or	
	Signature of C	Officeholder		