

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Laura Richard		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 125.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 14,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 257.17
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,910.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 18,843.07
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 68,000.00

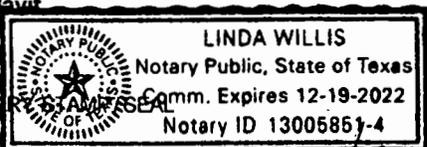
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Laura Richard

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



Sworn to and subscribed before me by Laura Richard this the 13th day of January

20 22 to certify which, witness my hand and seal of office.

Linda Willis
Signature of officer administering oath

Linda Willis
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____
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Laura Richard		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 14,000.00
2.	■ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 679.00
3.	■ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 90,000.00
4.	■ SCHEDULE E: LOANS	\$ 68,000.00
5.	■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2,050.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	■ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 3,860.70
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: 10
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)
4 Date 07/15/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Linebarger Gogan Blair & Sampson LLP 6 Contributor address; City; State; Zip Code P. O. Box 17428 Austin TX 78760	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 07/15/2021	Full name of contributor out-of-state PAC (ID#: _____) ABHR Contributor address; City; State; Zip Code 3200 SW Frwy Suite 2600 Houston, TX. 77027	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 07/15/2021	Full name of contributor out-of-state PAC (ID#: _____) Bob and Pat Hebert Contributor address; City; State; Zip Code 1503 Foster Creek Richmond TX. 77406	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/15/2021	Full name of contributor out-of-state PAC (ID#: _____) Cadence Bank Contributor address; City; State; Zip Code 4647 Sweetwater Blvd, Sugarland, TX 77479	Amount of contribution (\$) 1,000.00
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: 10
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)
4 Date 08/02/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Doris Gurecky 6 Contributor address; City; State; Zip Code 1820 Allen St. Rosenberg, TX. 77471	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/02/2021	Full name of contributor out-of-state PAC (ID#: _____) Penney Farris Contributor address; City; State; Zip Code 220 Arbor St. Baytown, TX. 77520	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/06/2021	Full name of contributor out-of-state PAC (ID#: _____) Phillip Andrews Contributor address; City; State; Zip Code 1802 Madenhair Sugar Land, TX. 77479	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Construction Manager		Employer (See Instructions)
Date 07/09/2021	Full name of contributor out-of-state PAC (ID#: _____) Kathy Keene Contributor address; City; State; Zip Code 3906 Wood Park Sugar Land, TX. 77479	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)
4 Date 07/09/2021	5 Full name of contributor out-of-state PAC (ID#: _____) A. D. Muller 6 Contributor address; City; State; Zip Code 24106 Falcon Point Dr. Katy TX. 77494	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions)
Date 07/11/2021	Full name of contributor out-of-state PAC (ID#: _____) Mike Kahn Contributor address; City; State; Zip Code 35 Laurel Wreath Trail Sugar Land, TX. 77498	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/13/2021	Full name of contributor out-of-state PAC (ID#: _____) Regina Morales Contributor address; City; State; Zip Code P.O. Box 751 Rosenberg, TX. 77471	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/11/2021	Full name of contributor out-of-state PAC (ID#: _____) Billie and Barbie Benton Contributor address; City; State; Zip Code 1509 Georgina St. Rosenberg, TX. 77471	Amount of contribution (\$) 400.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Laura Richard		3 Filer ID: (Ethics Commission Filers)
4 Date 08/03/2021	5 Full name of contributor: out-of-state PAC (ID#: _____) Mike Rozell 6 Contributor address; City; State; Zip Code 8518 Chipping Rock Dr. Sugar Land TX. 77479	7 Amount of contribution (\$) 125.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions)
Date 08/02/2021	Full name of contributor out-of-state PAC (ID#: _____) Bach Williams Contributor address; City; State; Zip Code 8505 Graceful Oak Katy, TX. 77494	Amount of contribution (\$) 125.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/02/2021	Full name of contributor out-of-state PAC (ID#: _____) Mohammed Abdulhameed Contributor address; City; State; Zip Code 8718 Grasswren Richmond TX. 77407	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/02/2021	Full name of contributor out-of-state PAC (ID#: _____) Cee Cee Parker Contributor address; City; State; Zip Code 4614 Thompson Chapel Rd. Sugar Land, TX. 77479	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)
4 Date 08/03/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Tina Mitchie 6 Contributor address; City; State; Zip Code 9111 S. Fitzgerald Way Missouri City, TX. 77459	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/03/2021	Full name of contributor out-of-state PAC (ID#: _____) Don & Christina McCall Contributor address; City; State; Zip Code 4838 Zachary Ln. Sugar Land, TX. 77479	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/03/2021	Full name of contributor out-of-state PAC (ID#: _____) Dominic Cashiola Contributor address; City; State; Zip Code 8406 Havens Glade Ct. Richmond, TX. 77406	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions)
Date 08/03/2021	Full name of contributor out-of-state PAC (ID#: _____) Gary Pearson Contributor address; City; State; Zip Code 2350 Wescreek Ln. Houston, TX. 77027	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Political Consultant		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)
4 Date 08/03/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Mary Favre 6 Contributor address; City; State; Zip Code 1110 Battery Ln. Sugar Land, TX. 77478	7 Amount of contribution (\$) 1,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/03/2021	Full name of contributor out-of-state PAC (ID#: _____) Michael Schiff Contributor address; City; State; Zip Code 37 The Oval Sugar Land, TX. 77479	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions)
Date 08/03/2021	Full name of contributor out-of-state PAC (ID#: _____) Jingling Clemence Contributor address; City; State; Zip Code 4127 Turtle Trails Ln. Sugar Land, TX. 77479	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/03/2021	Full name of contributor out-of-state PAC (ID#: _____) Sharon Leal Contributor address; City; State; Zip Code 12015 Meadowdale Dr. Stafford, TX. 77477	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)
4 Date 08/03/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Elsa Malakoff 6 Contributor address; City; State; Zip Code 823 Sandpiper Sugar Land TX. 77478	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Video Producer		9 Employer (See Instructions)
Date 08/03/2021	Full name of contributor out-of-state PAC (ID#: _____) E. B. Furman Contributor address; City; State; Zip Code 2930 Oakland Sugar Land, TX. 77478	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 08/03/2021	Full name of contributor out-of-state PAC (ID#: _____) Judith Schmid Contributor address; City; State; Zip Code 502 Past Shadow Grove Ln. Richmond, TX. 77406	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/03/2021	Full name of contributor out-of-state PAC (ID#: _____) Tobin Englet Contributor address; City; State; Zip Code 4534 Bermuda Sugar Land TX. 77479	Amount of contribution (\$) 100.00
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: 10
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)
4 Date 08/03/2021	5 Full name of contributor out-of-state PAC (ID#: _____) C. M. Scott	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 16931 Ascot Meadow Dr. Sugar Land TX. 77479		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/01/2021	Full name of contributor out-of-state PAC (ID#: _____) Mary Favre	Amount of contribution (\$) 4,000.00
Contributor address; City; State; Zip Code 1110 Battery Ln. Sugar Land TX. 77478		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/19/2021	Full name of contributor out-of-state PAC (ID#: _____) James Thompson	Amount of contribution (\$) 750.00
Contributor address; City; State; Zip Code 2333 Town Ctr. Blvd. Sugar Land, TX. 77479		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/17/2021	Full name of contributor out-of-state PAC (ID#: _____) Cheryl Stalinsky	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 32410 Watersmeet Fulshear TX. 77441		
Principal occupation / Job title (See Instructions) Retired		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: 1	
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0.00	
5 Date 10/14/2021	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhonda Mokerski	8 Amount of Contribution \$ 179.96	9 In-kind contribution description 4 metal flags
7 Contributor address: City; State; Zip Code 16906 Fairview Glen Sugar Land, TX. 77498		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Promotional Products		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 08/01/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim Icenhower	Amount of Contribution \$ 500.00	In-kind contribution description Consulting
Contributor address; City; State; Zip Code 3019 Arrowhead Sugar Land TX 77479		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Consultant		Employer (FOR NON-JUDICIAL)(See Instructions) Icenhower Consulting	
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
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PLEGGED CONTRIBUTIONS

SCHEDULE B

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 B: 1
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2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED PLEDGES	\$
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5 Date 01/10/2017	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laura Richard	8 Amount of Pledge \$ 90,000.00	9 In-kind contribution description
7 Pledgor address; City; State; Zip Code 427 Dockside Ct. Sugar Land, TX. 77478		Check if travel outside of Texas. Complete Schedule T.	

10 Principal occupation / Job title (See Instructions) Fort Bend County Clerk	11 Employer (See Instructions) Fort Bend County
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Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Pledge \$	In-kind contribution description
Pledgor address; City; State; Zip Code		Check if travel outside of Texas. Complete Schedule T.	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Pledge \$	In-kind contribution description
Pledgor address; City; State; Zip Code		Check if travel outside of Texas. Complete Schedule T.	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Pledge \$	In-kind contribution description
Pledgor address; City; State; Zip Code		Check if travel outside of Texas. Complete Schedule T.	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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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: 9
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 50
5 Date of loan 8/16/18	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Laura Richard	9 Loan Amount (\$) \$2000
6 Is lender a financial institution? Y N No	8 Lender address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	10 Interest rate 0
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) County Clerk		13 Employer (See Instructions) Fort Bend County
14 Description of Collateral <input type="checkbox"/> none None		15 <input type="checkbox"/> YES <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION N/A <input 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 8/7/19	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Laura Richard	Loan Amount (\$) \$1000
Is lender a financial institution? Y N No	Lender address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	Interest rate 0
		Maturity date N/A
Principal occupation / Job title (See Instructions) County Clerk		Employer (See Instructions) Fort Bend County
Description of Collateral <input type="checkbox"/> none None		<input checked="" type="checkbox"/> YES <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION N/A <input 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.

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: 9
2 FILER NAME <p style="text-align: center;">Laura Richard</p>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan 2/22/13	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Laura Richard	9 Loan Amount (\$) \$2000
6 Is lender a financial institution? Y N No	8 Lender address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	10 Interest rate 0
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) County Clerk		13 Employer (See Instructions) Fort Bend County
14 Description of Collateral <input type="checkbox"/> none None		15 <input type="checkbox"/> YES <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION N/A <input 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) Fort Bend County
Date of loan 9/30/13	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Laura Richard	Loan Amount (\$) \$3000
Is lender a financial institution? Y N No	Lender address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	Interest rate 0
		Maturity date N/A
Principal occupation / Job title (See Instructions) County Clerk		Employer (See Instructions) Fort Bend County
Description of Collateral <input type="checkbox"/> none None		YES <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION N/A <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

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If lender 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: 9
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
6 Date of loan 8/07/14	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Laura Richard	9 Loan Amount (\$) \$ 2000.00
6 Is lender a financial institution? Y N No	8 Lender address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	10 Interest rate 0
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) County Clerk		13 Employer (See Instructions) Fort Bend County
14 Description of Collateral <input type="checkbox"/> none None		15 <input type="checkbox"/> YES <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION N/A <input type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	19 Amount Guaranteed (\$)
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 8/20/14	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Laura Richard	Loan Amount (\$) \$2000
Is lender a financial institution? Y N No	Lender address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	Interest rate 0
		Maturity date N/A
Principal occupation / Job title (See Instructions) County Clerk		Employer (See Instructions) Fort Bend County
Description of Collateral <input type="checkbox"/> none None		<input checked="" type="checkbox"/> YES <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION N/A <input type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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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: 9
2 FILER NAME <p style="text-align: center;">Laura Richard</p>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan <p style="text-align: center;">10/1/14</p>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) <p style="text-align: center;">Laura Richard</p>	9 Loan Amount (\$) <p style="text-align: center;">\$20,000</p>
6 Is lender a financial institution? Y N No	8 Lender address; City; State; Zip Code <p style="text-align: center;">427 Dockside Ct. Sugar Land TX. 77478</p>	10 Interest rate <p style="text-align: center;">0</p>
		11 Maturity date <p style="text-align: center;">N/A</p>
12 Principal occupation / Job title (See Instructions) <p style="text-align: center;">County Clerk</p>		13 Employer (See Instructions) <p style="text-align: center;">Fort Bend County</p>
14 Description of Collateral <input type="checkbox"/> none None		15 <input type="checkbox"/> YES Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION N/A <input 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 <p style="text-align: center;">11/3/14</p>	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) <p style="text-align: center;">Laura Richard</p>	Loan Amount (\$) <p style="text-align: center;">\$10,000</p>
Is lender a financial institution? Y N No	Lender address; City; State; Zip Code <p style="text-align: center;">427 Dockside Ct. Sugar Land TX. 77478</p>	Interest rate <p style="text-align: center;">0</p>
		Maturity date <p style="text-align: center;">N/A</p>
Principal occupation / Job title (See Instructions) <p style="text-align: center;">County Clerk</p>		Employer (See Instructions) <p style="text-align: center;">Fort Bend County</p>
Description of Collateral <input type="checkbox"/> none None		YES <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION N/A <input 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.

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: 9
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan 12/29/16	7 Name of lender Laura Richard <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$) \$10,000
6 Is lender a financial institution? Y N No	8 Lender address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	10 Interest rate 0
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) County Clerk		13 Employer (See Instructions) Fort Bend County
14 Description of Collateral <input type="checkbox"/> none None		15 <input type="checkbox"/> YES <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION N/A <input type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 9/13/17	Name of lender Laura Richard <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$) \$1000
Is lender a financial institution? Y N No	Lender address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	Interest rate 0
		Maturity date N/A
Principal occupation / Job title (See Instructions) County Clerk		Employer (See Instructions) Fort Bend County
Description of Collateral <input type="checkbox"/> none None		YES <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION N/A <input type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)

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If lender 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: 9
2 FILER NAME <p style="text-align: center;">Laura Richard</p>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan 12/1/17	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Laura Richard	9 Loan Amount (\$) \$1000
6 Is lender a financial institution? Y N No	8 Lender address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	10 Interest rate 0
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) County Clerk		13 Employer (See Instructions) Fort Bend County
14 Description of Collateral <input type="checkbox"/> none None		15 <input type="checkbox"/> YES <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION N/A <input 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 7/28/18	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Laura Richard	Loan Amount (\$) \$1000
Is lender a financial institution? Y N No	Lender address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	Interest rate 0
		Maturity date N/A
Principal occupation / Job title (See Instructions) County Clerk		Employer (See Instructions) Fort Bend County
Description of Collateral <input type="checkbox"/> none None		YES <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION N/A <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

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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: 9
2 FILER NAME <p style="text-align: center;">Laura Richard</p>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan 2/17/20	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Laura Richard	9 Loan Amount (\$) \$ 1000
6 Is lender a financial institution? Y N No	8 Lender address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	10 Interest rate 0
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) County Clerk		13 Employer (See Instructions) Fort Bend County
14 Description of Collateral <input type="checkbox"/> none None		15 <input type="checkbox"/> YES <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION N/A <input 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 9/15/2020	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Laura Richard	Loan Amount (\$) \$1000
Is lender a financial institution? Y N No	Lender address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	Interest rate 0
		Maturity date N/A
Principal occupation / Job title (See Instructions) County Clerk		Employer (See Instructions) Fort Bend County
Description of Collateral <input type="checkbox"/> none None		YES <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION N/A <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

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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: 9
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan 12/8/2020	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Laura Richard	9 Loan Amount (\$) \$500
6 Is lender a financial institution? Y N No	8 Lender address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	10 Interest rate 0
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) County Clerk		13 Employer (See Instructions) Fort Bend County
14 Description of Collateral <input type="checkbox"/> none None		15 <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION N/A <input 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	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)	Loan Amount (\$)
Is lender a financial institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION N/A <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

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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: 9
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 04/19/2021	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Laura Richard	9 Loan Amount (\$) 500.00
6 Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	10 Interest rate 0.00
		11 Maturity date
12 Principal occupation / Job title (See Instructions) County Clerk		13 Employer (See Instructions) Fort Bend County
14 Description of Collateral <input type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 06/29/2021	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Laura Richard	Loan Amount (\$) 10,000.00
Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Lender address; City; State; Zip Code 427 Dockside Ct. Sugar Land TX. 77478	Interest rate 0.00
		Maturity date
Principal occupation / Job title (See Instructions) County Clerk		Employer (See Instructions) Fort Bend County
Description of Collateral <input type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)

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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	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:		2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)	
4 Date 09/06/2021		5 Payee name Michael Scott			
6 Amount (\$) 100.00		7 Payee address; City; State; Zip Code 8511 Mullins Houston, TX 77096			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising		(b) Description Graphics		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Laura Richard		Office sought Fort Bend County Clerk	
				Office held Fort Bend County Clerk	
Date 10/01/2021		Payee name Icenhower Consulting			
Amount (\$) 500.00		Payee address; City; State; Zip Code 3019 Arrowhead Sugar Land TX. 77479			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting		Description		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Laura Richard		Office sought Fort Bend County Clerk	
				Office held Fort Bend County Clerk	
Date 10/11/2021		Payee name Fort Bend Education Foundation			
Amount (\$) 200.00		Payee address; City; State; Zip Code P. O. Box 1004 Sugar Land TX. 77487			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution/Donation		Description Sponsorship		
	Check if travel outside of Texas. Complete Schedule T.		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	

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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.

1 Total pages Schedule F1:	2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
4 Date 11/03/2021	5 Payee name Fort Bend County Republican Party	
6 Amount (\$) 1,250.00	7 Payee address; City; State; Zip Code P. O. Box 461 Sugar Land TX. 77487	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fee	(b) Description Filing Fee
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Laura Richard	Office sought Fort Bend County Clerk
		Office held Fort Bend County Clerk
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	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	Office sought
		Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	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	Office sought
		Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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 F4:	2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 257.17
5 Date 07/07/2021	6 Payee name Branding Matters	
7 Amount (\$) 232.74	8 Payee address; City; State; Zip Code 8034 Hwy 90 A Sugar Land TX. 77478	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Shirts
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Laura Richard	Office sought Fort Bend County Clerk
		Office held Fort Bend County Clerk
Date 07/15/2021	Payee name Fort Bend History Association Online	
Amount (\$) 75.00	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution/Donation	Description
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 257.17
5 Date 07/20/2021	6 Payee name Pamela Printing	
7 Amount (\$) 373.46	8 Payee address; City; State; Zip Code 550 Julie Rivers Dr. Sugar Land TX. 77478	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Stickers
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Laura Richard	Office sought Fort Bend County Clerk
		Office held Fort Bend County Clerk
Date 07/21/2021	Payee name Chris Gillett	
Amount (\$) 400.00	Payee address; City; State; Zip Code 3200 W. Freeway Houston TX 77027	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Headshot
	(c) 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 Laura Richard	Office sought Fort Bend County Clerk
		Office held Fort Bend County Clerk

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 257.17
5 Date 08/02/2021	6 Payee name Fort Bend Buyers Group	
7 Amount (\$) 100.00	8 Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contribution/Donation	(b) Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/03/2021	Payee name Fort Bend Junior Service League	
Amount (\$) 520.00	Payee address; City; State; Zip Code 17424 W. Grand Parkway POB #209 Sugar Land TX. 77479	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution/Donation	Description
	<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

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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 |
| | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 257.17
5 Date 08/03/2021	6 Payee name Pacific Coast Tacos	
7 Amount (\$) 251.68	8 Payee address; City; State; Zip Code 1525 Lake Pointe Pkway Sugar Land TX. 77478	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Food/Beverage
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Laura Richard	Office sought Fort Bend County Clerk
		Office held Fort Bend County Clerk
Date 09/14/2021	Payee name Constant Contact	
Amount (\$) 365.54	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Laura Richard	Office sought Fort Bend County Clerk
		Office held Fort Bend County Clerk

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 257.17
5 Date 09/22/2021	6 Payee name Pamela Printing	
7 Amount (\$) 292.28	8 Payee address; City; State; Zip Code 550 Julie Rivers Dr. Sugar Land TX. 77478	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Laura Richard	Office sought Fort Bend County Clerk
		Office held Fort Bend County Clerk
Date 10/01/2021	Payee name Icenhower Consulting	
Amount (\$) 500.00	Payee address; City; State; Zip Code 3019 Arrowhead Sugar Land TX. 77479	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting	Description
	(c) <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 Laura Richard	Office sought Fort Bend County Clerk
		Office held Fort Bend County Clerk

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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 |
| | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 257.17
5 Date 12/06/2021	6 Payee name Fort Bend Independent	
7 Amount (\$) 150.00	8 Payee address; City; State; Zip Code 10701 Corporate Drive # 282 Stafford, Texas, 77477	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX; officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Laura Richard	Office sought Fort Bend County Clerk
		Office held Fort Bend County Clerk
Date 12/28/2021	Payee name Homestead.com	
Amount (\$) 131.94	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Website	Description
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX; officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Laura Richard	Office sought Fort Bend County Clerk
		Office held Fort Bend County Clerk

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 257.17
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5 Date 07/31/2021	6 Payee name Anedot
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7 Amount (\$) 116.40	8 Payee address; City; State; Zip Code 1340 Poydras St. New Orleans, LA 70112
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Credit Card Fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Laura Richard	Office sought Fort Bend County Clerk	Office held Fort Bend County Clerk
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Date 08/31/2021	Payee name Anedot
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Amount (\$) 131.94	Payee address; City; State; Zip Code 1340 Poydras St. New Orleans, LA 70112
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Credit Card Fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Laura Richard	Office sought Fort Bend County Clerk	Office held Fort Bend County Clerk
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED