

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

22

OFFICE USE ONLY

Date Received

OCT 11 2022 RCVD

Date Hand-delivered or Date Postmarked

Receipt # Amount \$

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
Ms. Laura

NICKNAME LAST SUFFIX
Richard

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
427 Dockside Ct. Sugar Land TX 77478

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
(281) 433-3363

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
Mrs. Doris

NICKNAME LAST SUFFIX
Gurecky

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
2420 3rd Street Rosenberg TX 77471

(Residence or Business)

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(281) 342-5926

9 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 Reporting Limit Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year Month Day Year
7 / 16 / 22 THROUGH 9 / 29 / 22

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff Other Description
11 / 8 / 22 General Special

12 OFFICE

OFFICE HELD (if any)
Fort Bend County Clerk

13 OFFICE SOUGHT (if known)
Fort Bend County Clerk

14 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.

COMMITTEE TYPE	COMMITTEE NAME
GENERAL	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
SPECIFIC	COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

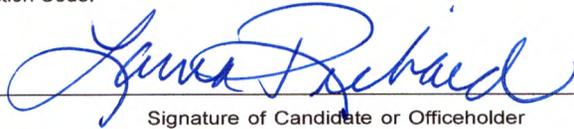
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

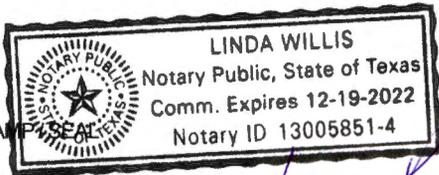
15 C/OH NAME Laura Richard		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,625.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,224.81
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 12,995.73
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.


Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP

Sworn to and subscribed before me by Laura Richard this the 11th day of October

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	\$ 1,625.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$ 68,000.00
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,150.00
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 5,074.81
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: 3
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Teresa Reading	7 Amount of contribution (\$) 100.00
	6 Contributor address; City; State; Zip Code 3003 Arrowhead Sugar Land TX 77479	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Beverly Stricker	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code P.O.Box 1010 Needville TX 77461	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Buford Jurica	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 8202 River Fern Dr. Missouri City TX 77459	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Eugenia Blomstrom	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 3106 River Fern Dr. Richmond TX 77469	
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.

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: 3
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) David Boehm 6 Contributor address; City; State; Zip Code 23503 Eula Mae Richmond TX 77469	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/14/2022	Full name of contributor out-of-state PAC (ID#: _____) Nancy Parr Contributor address; City; State; Zip Code 14019 SW Frwy Sugar Land TX 77478	Amount of contribution (\$) 750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/14/2022	Full name of contributor out-of-state PAC (ID#: _____) Randy Johnson Contributor address; City; State; Zip Code 3927 Mossycup Lane Richmond TX 77469	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/14/2022	Full name of contributor out-of-state PAC (ID#: _____) James Skarzynski Contributor address; City; State; Zip Code 2915 Persimmon Grv. Richmond TX 77469	Amount of contribution (\$) 25.00
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3
2 FILER NAME Laura Richard		3 Filer ID (Ethics Commission Filers)
4 Date 09/14/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Guy LaRose 6 Contributor address; City; State; Zip Code 2922 Black Walnut Court Richmond TX 77469	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (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 8/16/18	7 Name of lender <input type="checkbox"/> out-of-state PAC (DR: _____) 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 (DR: _____) 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

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LOANS

SCHEDULE E

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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 checked="" 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) County Clerk		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 Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)

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LOANS

SCHEDULE E

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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 8/07/14	7 Name of lender <input type="checkbox"/> out-of-state PAC (DR: _____) 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 checked="" 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 8/20/14	Name of lender <input type="checkbox"/> out-of-state PAC (DR: _____) 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	Amount Guaranteed (\$)
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 <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? <p style="text-align: center;">Y N No</p>	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 checked="" type="checkbox"/> YES <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <p style="text-align: center;">N/A</p> <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 <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? <p style="text-align: center;">Y N No</p>	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 <p style="text-align: center;">N/A</p> <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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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 <input type="checkbox"/> out-of-state PAC (ID# _____) Laura Richard	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	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See instructions)		21 Employer (See instructions)
Data of loan 8/13/17	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: 4
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 12/4/17	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 checked="" type="checkbox"/> YES <input type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
18 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 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 Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal Occupation (See instructions)		Employer (See instructions)

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LOANS

SCHEDULE E

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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 2/17/20	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Laura Richard	9 Loan Amount (\$) \$ 1000
8 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"/> 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 9/15/2020	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 Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)

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LOANS

SCHEDULE E

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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 (DR: _____) 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 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	Name of lender <input type="checkbox"/> out-of-state PAC (DR: _____)	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 (OR: _____) 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	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
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 (OR: _____) 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	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.

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	2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
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4 Date 08/18/2022	5 Payee name Icenhower Consulting
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6 Amount (\$) 1,200.00	7 Payee address; City; State; Zip Code 3019 Arrowhead Sugar Land TX. 77479
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting	(b) Description
	(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	Office sought	Office held
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Date 08/25/2022	Payee name FB Christian Magazine
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Amount (\$) 600.00	Payee address; City; State; Zip Code 650 W. Bough Suite 10 Houston TX 77024
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	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	Office sought	Office held
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Date 09/01/2022	Payee name Icenhower Consulting
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Amount (\$) 1,200.00	Payee address; City; State; Zip Code 3019 Arrowhead Sugar land TX 77479
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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	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	2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
4 Date 09/17/2022	5 Payee name Mike Scott	
6 Amount (\$) 150.00	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
	(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	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. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	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. 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	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: 5	2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date 07/19/2022	6 Payee name FB Buyers Club	
7 Amount (\$) 100.00	8 Payee address; City; State; Zip Code P.O.Box 19742 Sugar Land TX 77496	
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) Donation	
	(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	Office sought Office held
Date 07/19/2022	Payee name PYR Cowboy UP	
Amount (\$) 500.00	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) Donation	
	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	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: 5	2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0.00
5 Date 07/26/2022	6 Payee name Branding Matters	
7 Amount (\$) 920.13	8 Payee address; City; State; Zip Code 8034 Hwy 90 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) 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	Office sought Office held
Date 08/08/2022	Payee name Pamela Printing	
Amount (\$) 149.39	Payee address; City; State; Zip Code 550 Julie Rivers Sugar Land TX 77478	
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) Printing	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	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: 5	2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0.00
5 Date 08/24/2022	6 Payee name Absolutely Focus Media	
7 Amount (\$) 2,000.00	8 Payee address; City; State; Zip Code P.O.Box 1253 Richmond TX 77406	
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	Office sought Office held
Date 08/16/2022	Payee name UPS	
Amount (\$) 18.00	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 Postage
	(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	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: 5	2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0.00
5 Date 09/15/2022	6 Payee name Pamela Printing	
7 Amount (\$) 573.73	8 Payee address; City; State; Zip Code 550 Julie Rivers 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) Printing	(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	Office sought Office held
Date 09/15/2022	Payee name Pamela Printing	
Amount (\$) 138.56	Payee address; City; State; Zip Code 550 Julie Rivers Sugar Land TX 77478	
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) Printing	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	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: 5	2 FILER NAME Laura Richard	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0.00
5 Date 09/21/2022	6 Payee name Earthly	
7 Amount (\$) 675.00	8 Payee address; City; State; Zip Code Unknown	
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) Printing	(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	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	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	Office sought Office held

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