CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

he C/OH Instruction	Guide explains how to complete this form.	1 Filer ID	 Total pages filed: 10
CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST Michae	MI	OFFICE USE ONLY
NAME	AMICARC		Date Received
	NICKNAME LAST Beard	SUFFIX	JUL 15 2024
CANDIDATE /	ADDRESS / PO BOX; APT / SUITE #; C	CITY: ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	PO Box 575		Receipt # Amount
Change of Address	Needville, TX 77461		Date Processed
			Date Imaged
CAMPAIGN TREASURER	MS / MRS / MR	MI	
NAME	Gloria		
	NICKNAME LAST	SUFFIX	· .
	Green-		
CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY	(; STATE; ZIP CODE
(Residence or Business)	20202 N	leer Run	
	Namo): APT/SUITE#; CITY Leck-Rin Tf Mf30	
CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION	
PHONE	\$22.715	5-3359	
REPORT			
TYPE	January 15 30th day bef	ore election Runoff	15th day after campaign treasurer appointment (officeholder only)
	X July 15 8th day befo	re election Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
PERIOD COVERED	Month Day Year	Month Day	
COVERED	01/01/2024	THROUGH 06/30/20	524
0 ELECTION	ELECTION DATE		
	Month Day Year	Primary Runoff	Other
		General Special	
1 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGH	IT (if known)
	Constable Pot 4		
	GC	TO PAGE 2	
orms provided by Te		ethics.state.tx.us	Version V4.1.0.d378at

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 10

				2 01 10
13 C / OH NAME	Beard, Mike		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to d officeholders are required to report this information	the candidate's or officeh	older's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	····	
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	S	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	i)	\$ 3,200.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
-	4. TOTAL POLITIC	AL EXPENDITURES		\$ 4,392.45
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L/ RIOD	AST DAY OF THE	\$ 23,605.51
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		l swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
	VERONICA RODRIGUE: NOTARY PUBLIC, STATE OF TEXA Notary ID #13065032-0 Expires May 06, 2028	Mali	Candidate or Officeholde	er
Swor <u>n to</u> and subso	TARY STAMP / SEAL ABC	Michael Bear	, this the	day
Signature of office	n SUD2 er æministering/	VENNICA RODHIGU Printed name of officer administering	L2 Cl Title of officer a	LUK administering oath

Forms provided by Texas Ethics Commission

Version V4.1.0.d378aba0

FORM C/OH **COVER SHEET PG 3**

_					3 of 10
	ER NAM		19 Filer ID		
		E SUBTOTALS SCHEDULE		SUB.	TOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,200.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	4,392.45
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$	
12.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	2.36

SUBTOTALS - C/OH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instru	ction Guide explains how to complete this	form.	Total pages Schedule A1: Sch: 1/2 Rpt: 4/10	
FILER NAME Beard, Mike		3	B Filer ID	
Date 04/22/2024	 5 Full name of contributor out-of-state PAC (ID# Davidson, Brian and Diane 6 Contributor address; City; State; Zip Code 20206 Deer Run Rd Damon, TX 77430 	؛) 7 	Amount of Contribution (\$)	\$500.00
Principal occu Attorney	upation / Job title (See Instructions)	9 Employer (See Instructions)		
Date 03/25/2024	Full name of contributor out-of-state PAC (ID# Dubose, Caston Contributor address; City; State; Zip Code Missouri City, TX 77459		Amount of Contribution (\$)	\$200.00
Principal occu Police Office	ipation / Job title (See Instructions) er	Employer (See Instructions) Fort Bend County		
Date 04/22/2024	Full name of contributor out-of-state PAC (ID# Green, Ronnie & Gloria Contributor address; City; State; Zip Code 20202 Deer Run Rd		Amount of Contribution (\$)	\$500.00
Principal occu Self Employ	Damon, TX 77430 upation / Job title (See Instructions) red	Employer (See Instructions)		
Date 02/26/2024	Full name of contributor out-of-state PAC (ID# Kunz , Bob & Margaret Contributor address; City; State; Zip Code 3791 Reeh Rd Needville, TX 77461		Amount of Contribution (\$)	\$250.00
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions) Retired		
Date 02/16/2024	Full name of contributor out-of-state PAC (ID# Mellon, Sidney Contributor address; City; State; Zip Code PO Box 526 Rosenberg, TX 77471		Amount of Contribution (\$)	\$250.00
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)		

ΜΟΝΕΙ	TARY POLITICAL CONTRIBUTION	ONS	SCHED	ULE A1
The Instru	action Guide explains how to complete this	form.	1 Total pages Schedule A1 Sch: 2/2 Rpt: 5/10	•
2 FILER NAME Beard, Mike		3 Filer ID		
4 Date 04/30/2024	 Full name of contributor out-of-state PAC (ID#: Southall, Terri Contributor address; City; State; Zip Code 23726 Materson Garden Ln 	7 Amount of Contribution (\$) \$500.00	
9 Dringingless	Richmon, TX 77469			
8 Principal occu	Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Fort Bend County			

CONTRIBUT	EXPENDITURES FROM POLITICAL SCHEDU	ile F1				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations I Candidate/Officeholder Credit Card Payment						
Total pages Schedul Sch: 1/4 Rpt: 6/3	F1: 2 FILER NAME 3 Filer ID					
Date 01/05/2024	5 Payee name 36 Dining					
Amount (\$) \$30	7 Payee address; City; State; Zip Code 1218 First Stree					
PURPOSE OF EXPENDITURE	Rosenberg, TX 77471 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Volunteer Meals					
Complete ONLY if dia expenditure to benefit						
Date 01/11/2024	Payee name Academy					
Amount (\$) \$162						
PURPOSE OF EXPENDITURE	Rosenberg, TX 77471 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation Items					
Complete <u>ONLY</u> if dir expenditure to benefi						
Date 02/29/2024	Payee name Fort Bend Herald					
Amount (\$) \$703	Payee address; City; State; Zip Code .40 1902 4th Street					
	Rosenberg, TX 77471					
	Rosenberg, 1x //4/1					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Newspaper					

	EXPENDITURE CATEGORIES F	OR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	Event Expense Loan R Fees Office (Food/Beverage Expense Polling By - Gift/Awards/Memorials Expense Printing	epayment/Reimbursement Overhead/Rental Expense Expense j Expense s/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expens Travel in District Travel Out of District OTHER (enter a category not listed above)
Total pages Schedule F1:			3 Filer ID
Sch: 2/4 Rpt: 7/10	Beard, Mike		
Date	5 Payee name		
01/04/2024	Home Depot		
Amount (\$) \$33.60	7 Payee address; City; State; Zip of 24400 Commercial Dr Rosenberg, TX 77471	Code	
DUDDOOD		Las	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		outside of Texas. Complete Schedule T. n, TX, officeholder living expense]
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office se	bught	Office held
Date			
Date	Pavee name		
04/06/2024	Payee name Lunches of Love		
		Code	
04/06/2024	Lunches of Love	Code	
04/06/2024 Amount (\$)	Lunches of Love Payee address; City; State; Zip (Code	
04/06/2024 Amount (\$)	Lunches of Love Payee address; City; State; Zip of 1416 Radio Lane	(b) Description	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
04/06/2024 Amount (\$) \$100.00 PURPOSE OF	Lunches of Love Payee address; City; State; Zip (1416 Radio Lane Rosenberg, TX 77471 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office so	(b) Description Check if travel Check if Austir Donation	
04/06/2024 Amount (\$) \$100.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Lunches of Love Payee address; City; State; Zip of 1416 Radio Lane Rosenberg, TX 77471 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office schedule	(b) Description Check if travel Check if Austir Donation	n, TX, officeholder living expense
04/06/2024 Amount (\$) \$100.00 PURPOSE OF EXPENDITURE Complete ONLY if direct	Lunches of Love Payee address; City; State; Zip (1416 Radio Lane Rosenberg, TX 77471 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office so	(b) Description Check if travel Check if Austir Donation	n, TX, officeholder living expense
04/06/2024 Amount (\$) \$100.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date	Lunches of Love Payee address; City; State; Zip of 1416 Radio Lane Rosenberg, TX 77471 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office so H Payee name	(b) Description Check if travel Check if Austir Donation Donght	n, TX, officeholder living expense
04/06/2024 Amount (\$) \$100.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 01/13/2024 Amount (\$)	Lunches of Love Payee address; City; State; Zip of 1416 Radio Lane Rosenberg, TX 77471 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office schedule H Payee name Needville Youth Fair Payee address; City; State;	(b) Description Check if travel Check if Austir Donation Donght	n, TX, officeholder living expense
04/06/2024 Amount (\$) \$100.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 01/13/2024 Amount (\$) \$400.00	Lunches of Love Payee address; City; State; Zip of 1416 Radio Lane Rosenberg, TX 77471 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office schedule Payee name Needville Youth Fair Payee address; City; State; Zip of 13631 Hwy 36	(b) Description Check if travel Check if Austir Donation Donght	n, TX, officeholder living expense
04/06/2024 Amount (\$) \$100.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 01/13/2024 Amount (\$) \$400.00	Lunches of Love Payee address; City; State; Zip (1416 Radio Lane Rosenberg, TX 77471 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office su Payee name Needville Youth Fair Payee address; City; State; Zip (13631 Hwy 36 Needville, TX 77461	(b) Description Check if travel Check if Austir Donation Code Code Code Code Code	n, TX, officeholder living expense

CONTRIBUT	EXPENDITURES FROM POLIT TONS	ICAL	SCHEDULE F1
n T to the second second	EXPENDITURE CATEGORIE	ES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations M Candidate/Officeholder/ Credit Card Payment	Event Expense L Fees C Food/Beverage Expense P Ade By - Gitt/Awards/Memorials Expense P	oan Repayment/Reimbursem Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labo	se Transportation Equipment & Related Expense Travel in District Travel Out of District r OTHER (enter a category not listed above)
. Total pages Schedule Sch: 3/4 Rpt: 8/1			3 Filer ID
Date 01/04/2024	5 Payee name Prasla's		
Amount (\$) \$83	7 Payee address; City; State; 2 3.00 3630 FM 2977 Richmond, TX 77469	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedu Food/Beverage Expense	Check if tr	avel outside of Texas. Complete Schedule T. Justin, TX, officeholder living expense
Complete <u>ONLY</u> if directly on the other sectors of		ice sought	Office held
Date 03/05/2024	Payee name Republican Party of Texas		
Amount (\$) \$2,500	0.00 807 Brazos St	Zip Code	
	Austin, TX 78701	(b) Description	l avel outside of Texas. Complete Schedule T.
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedu Event Expense	Check if tr	ustin, TX, officeholder living expense eagan Dinner avidson
OF	Event Expense ect Candidate/Officeholder name Officeholder	Check if tr Check if A Lincoln R	eagan Dinner
OF EXPENDITURE	Event Expense ect Candidate/Officeholder name Officeholder	Check if tr Check if A Lincoln R Green / D	eagan Dinner avidson
OF EXPENDITURE Complete <u>ONLY</u> if dir expenditure to benefit Date 01/04/2024 Amount (\$)	Event Expense ect Candidate/Officeholder name Officeholder name t C/OH Payee name Republican Women's Club of Katy	Check if tr Check if A Lincoln R Green / D	eagan Dinner avidson
OF EXPENDITURE Complete <u>ONLY</u> if dir expenditure to benefit Date 01/04/2024 Amount (\$)	Event Expense Ect Candidate/Officeholder name Officeholder name Officeholder name Republican Women's Club of Katy Payee address; City; State; 2 0.00 9550 Spring Green Blvd	Zip Code	eagan Dinner avidson Office held

	POLITICAL EXI	SCHEDULE F1				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	√ - al Committee	EXPENDITURE C Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	Office Over Polling Exp ense Printing Exp Salaries/Wa	ment/Reimbursement nead/Rental Expense ense ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 4/4 Rpt: 9/10	2 FILER NAM Beard, Mik				3 Filer ID
4	Date 04/21/2024	5 Payee name Rosenberg	e y Little League			L
6	Amount (\$) \$350.00	7 Payee addre 3701 Foun	tains Dr	State; Zip Cod	e	
8	PURPOSE OF EXPENDITURE	(a) Category (Contributio	g, TX 77471 See Categories listed at the to nns/Donations Made /Officeholder/Politica	Ву		outside of Texas. Complete Schedule T. , TX, officeholder living expense ation
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office soug	ht	Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

F	The last			1	Total p	ages Schedule K:	
			on Guide explains how to complete this form.			/1 Rpt: 10/10	
2	FILER NAME			3	Filer ID)	
_	Beard, Mike Date	_	Name of person from whom amount is received			8 Amount (\$)	
4	Date 06/30/2024	5	Name of person from whom amount is received New First Bank			o Amount (\$)	\$2.36
	00/00/2024	6	Address of person from whom amount is received; City; State; Zip Code				
		ľ	PO Box 470				
		L	El Campo, TX 77437				
		7	Purpose for which amount is received	Check if polit	icai conti	ribution returned to file	r
			Interest checking				
ļ							
F	orme providae	h	v Texas Ethics Commission www.ethics.state.tx.us			Version V4.1.	0.d378aba