

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 7
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Allison	OFFICE USE ONLY Date Received RECEIVED APR 28 2023 BY: <i>[Signature]</i>	
	NICKNAME LAST SUFFIX Drew		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 77 Sugar Creek Blvd. Suite 375 Sugar Land, TX 77478		Date Delivered or Date Postmarked @ 2:05 P.M.
	Receipt #		Amount
	Date Processed		
	Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI		
	NICKNAME LAST SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 03/28/2023 04/26/2023		
10 ELECTION	ELECTION DATE Month Day Year 05/06/2023	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) FBISD Trustee Position 5 Place Sugar Land District FBISD	

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

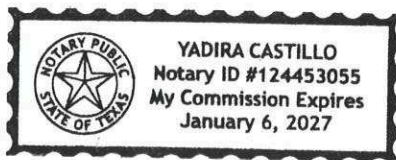
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13 C / OH NAME Drew, Allison	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures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

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,841.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	1,234.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	966.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT



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

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Allison Drew, this the 28th day of April, 2023, to certify which, witness my hand and seal of office.

Yadira Castillo Yadira Castillo Notary
Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

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18 FILER NAME Drew, Allison		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,200.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 641.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 1,234.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 1/1 Rpt: 4/7

2 FILER NAME

Drew, Allison

3 Filer ID

4 Date
04/25/2023

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Fort Bend Business Coalition

7 Amount of Contribution (\$)
\$1,000.00

6 Contributor address; City; State; Zip Code
PO Box 19336
Sugar Land, TX 77496

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/17/2023

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Fort Bend United

Amount of Contribution (\$)
\$1,000.00

Contributor address; City; State; Zip Code
PO Box 420811
Houston, TX 77242

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/10/2023

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Walker, Beverly

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
1422 Eugene Heimann Cir
Richmond, TX 77469

Principal occupation / Job title (See Instructions)
FB County Clerk

Employer (See Instructions)
Fort Bend

Date
04/03/2023

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Yeung, Bridget

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
538 Lombardy Drive
Sugar Land, TX 77478

Principal occupation / Job title (See Instructions)
Retired Council Member

Employer (See Instructions)
City of Sugar Land

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:
Sch: 1/1 Rpt: 5/7

2 FILER NAME
Drew, Allison

3 Filer ID

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date
04/26/2023

6 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Texas Gulf Coast AFL-CIO Working People PAC

7 Contributor address; City; State; Zip Code
2506 Sutherland St.

Houston, TX 77023

8 Amount of contribution (\$)
\$641.00

9 In-kind contribution description
Direct voter contact

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

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)

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/2 Rpt: 6/7	2 FILER NAME Drew, Allison	3 Filer ID
4 Date 04/07/2023	5 Payee name Felicia's Professional Writing Felicia Moon	
6 Amount (\$) \$300.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3311 Raleigh Row Sugar Land, TX 77459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Content
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/07/2023	Payee name Gabriela Gotay	
Amount (\$) \$250.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 25331 Calderstone Court Katy, TX 77494	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Content
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/26/2023	Payee name Johnson, Andrea	
Amount (\$) \$180.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code TBD TBD, TX 00000	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Polling Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poll Worker
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/2 Rpt: 7/7	2 FILER NAME Drew, Allison	3 Filer ID
4 Date 04/22/2023	5 Payee name Real People Politically Active	
6 Amount (\$) \$504.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2440 Texas Pkwy Suite 343 Missouri City, TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Canvass	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvass
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	