

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: 2/mr
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <u> </u> FIRST <u>Stephane</u> MI <u>L</u>	OFFICE USE ONLY	
	NICKNAME <u> </u> LAST <u>Rovelo</u> SUFFIX <u> </u>		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 5709 Indian Hills Dr. Garland, TX 75044		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (469) PHONE NUMBER 223 9144 EXTENSION 	Date Received 4/3/25 MAH	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <u> </u> FIRST <u>Long</u> MI <u>T</u>	Date Hand Delivered or Date Postmarked 4/3/25	
	NICKNAME <u>Pham</u> LAST <u> </u> SUFFIX <u> </u>	Receipt # <u> </u> Amount \$ <u> </u>	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 902 Singing Hills Dr. Garland TX 75044		
8 CAMPAIGN TREASURER PHONE	AREA CODE (469) PHONE NUMBER 835 7345 EXTENSION 		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year Month Day Year 1 / 15 / 25 THROUGH 3 / 24 / 25		
11 ELECTION	ELECTION DATE Month Day Year 5 / 3 / 25	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Garland TSP Board trustee Place 1	
14 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. 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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC		COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS	

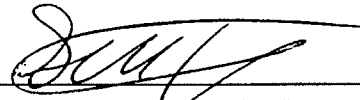
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME <u>Stéphane Rovel</u>		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)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>4,920.00</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>3,120.41</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>1,799.59</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>500.00</u>

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/SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Stéphane L. Rovel, and my date of birth is 07/07/1992.

My address is 5709 Indian Hills Dr., Garland, Tx, 75044, USA.
(street) (city) (state) (zip code) (country)

Executed in Dallas County, State of Texas, on the 2nd day of March, 2025.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

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

19 FILER NAME <i>Stephane Lovels</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,920.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 500.00
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3120.41
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> 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: 13
2 FILER NAME Stephane Povelos		3 Filer ID (Ethics Commission Filers)
4 Date 1/27/25	5 Full name of contributor Kris Beard <input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions) Unemployed		9 Employer (See Instructions) N/A
Date 2/1/25	Full name of contributor Kimberly Lozada <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 6918 Holly Hills Lane Sachse TX, 75048		
Principal occupation / Job title (See Instructions) Service Learning Coordinator		Employer (See Instructions) Dallas College
Date 2/8/25	Full name of contributor Carlos Povelos <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 1324 Primrose Ln Pecos TX 79715		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Dallas College
Date 2/15/25	Full name of contributor KEITH MONTGOMERY <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) 200
Contributor address; City; State; Zip Code 6304 CHILSEA WAY GARLAND TX 75044		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) —
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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: 13
2 FILER NAME Stephane Rovel		3 Filer ID (Ethics Commission Filers)
4 Date 2-15-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carla Burnett	7 Amount of contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 4209 Bunker Hill Rd Sachse TX 75048		
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) GISD
Date 2/15/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAL Ticknor	Amount of contribution (\$) \$30.00
Contributor address; City; State; Zip Code 8012 Morningside Garland TX 75041		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) —
Date 2/15/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cynthia Devaney	Amount of contribution (\$) \$ 50.00
Contributor address; City; State; Zip Code 8617 Hackney Ln. Dallas TX 75238		
Principal occupation / Job title (See Instructions) Instructor		Employer (See Instructions) Dallas College
Date 2/18/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benedict Rovel	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 6204 Yellowstone Dr. Garland Mesquite TX 75150		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
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 Stephane Kovel		3 Filer ID (Ethics Commission Filers)
4 Date 6/15/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander Booth 6 Contributor address; City; State; Zip Code 2113 Yewson Ct Carrollton TX 75007	7 Amount of contribution (\$) 75.00
8 Principal occupation / Job title (See Instructions) Team Lead Contract Specialist		9 Employer (See Instructions) Petersbilt Mgmt Company
Date 2/15/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trenton Duke Contributor address; City; State; Zip Code 8 Chelsey Cir Richardson TX 75082	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) software developer		Employer (See Instructions) Costco
Date 2/10/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angela Cao Contributor address; City; State; Zip Code 314 Mandarin Circle Wylie TX 75098	Amount of contribution (\$) \$100
Principal occupation / Job title (See Instructions) Regional Sales Manager		Employer (See Instructions) Nan McKay and Associates
Date 2/15/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Hanna Contributor address; City; State; Zip Code 6301 Chelsea Way Garland TX 75044	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 13
2 FILER NAME Stephane Revelo		3 Filer ID (Ethics Commission Filers)
4 Date 2/15/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Gessler	7 Amount of contribution (\$) \$ 100.00 20.00
6 Contributor address; City; State; Zip Code 1318 Lakebreeze Dr. Garland, TX 75043		
8 Principal occupation / Job title (See Instructions) unknown		9 Employer (See Instructions) unknown
Date 2/15/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aerth Guthrie	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 401 Boyd Dr. Apt 6310 Grapevine TX 76051		
Principal occupation / Job title (See Instructions) Manager-Software Dev and Eng		Employer (See Instructions) Schwab
Date 2/14/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gabriel Chan	Amount of contribution (\$) \$ 250.00
Contributor address; City; State; Zip Code 2806 Sherwin St. Houston, TX 77007		
Principal occupation / Job title (See Instructions) Pediatric Physical Therapist		Employer (See Instructions) Texas Children's Hospital
Date 2/19/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long Pham	Amount of contribution (\$) \$ 200.00
Contributor address; City; State; Zip Code 902 Singing Hills Dr. Garland TX 75044		
Principal occupation / Job title (See Instructions) Ercot Real Time Power Trader		Employer (See Instructions) Garland Power and Light
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

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: 13
2 FILER NAME Stéphane Rouelo		3 Filer ID (Ethics Commission Filers)
4 Date 2/18/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian Cook	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 413 E Greywing Circle The Woodlands TX 77382		
8 Principal occupation / Job title (See Instructions) Pilot		9 Employer (See Instructions) United Airlines
Date 2/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luis Rodriguez	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2920 Tenor Way Sachse TX 75048		
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Bio Plus Specialty Infusion
Date 3/4/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenee Allemond	Amount of contribution (\$) \$50
Contributor address; City; State; Zip Code 8409 Lighthouse Dr. Rowlett, TX 75089		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Garland ISD
Date 2/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thanh Cao	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1021 Levent Blvd TX 75094		
Principal occupation / Job title (See Instructions) Insurance Sales		Employer (See Instructions) World Finance Group
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: 13
2 FILER NAME Stephane Ruelb		3 Filer ID (Ethics Commission Filers)
4 Date 3/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aaron Kubosumi	7 Amount of contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code 5001 W Wadley Ave Midland TX 79707		
8 Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) N/A
Date 3/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aaron Cook	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code 906 W Cole St McKinney TX 75069		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Vista One Services
Date 3/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy Clench	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1632 Madrid Way Rockwall TX 75087		
Principal occupation / Job title (See Instructions) Business Development Officer		Employer (See Instructions) Texas Security Bank
Date 3/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbara Hood	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code 2851 Coteau Way Dallas TX 75227		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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: 13
2 FILER NAME Stephane Povel		3 Filer ID (Ethics Commission Filers)
4 Date 3/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Tranga Lang 6 Contributor address; City; State; Zip Code 4213 Crestfield Dr. Richardson Tx 75082	7 Amount of contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Self-employed
Date 3/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dylan Anderson Contributor address; City; State; Zip Code 906 Cole St. McKinney Tx 75069	Amount of contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Senior Client Solutions Manager		Employer (See Instructions) Scorpion Internet Marketing
Date 3/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: M. Tien Cook Contributor address; City; State; Zip Code 43 E Greywing Circle The Woodlands Tx 77382	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Hostess		Employer (See Instructions) The Republic Grille
Date 3/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Miguel Vargas Contributor address; City; State; Zip Code 649 Gentry Ln Flower Mound Tx 75028	Amount of contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Food Journalist		Employer (See Instructions) Dallas Observer
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: 13	
2 FILER NAME Stephane Poreb				3 Filer ID (Ethics Commission Filers)	
4 Date 3/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohammad Akhwal			7 Amount of contribution (\$) \$ 100.00	
	6 Contributor address; City; State; Zip Code 13138 Halwin Circle Dallas Tx 75243				
8 Principal occupation / Job title (See Instructions) CPA			9 Employer (See Instructions) Northmark Strategies		
Date 3/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lesbia Mejia			Amount of contribution (\$) \$ 25.00	
	Contributor address; City; State; Zip Code 512 Llano Ln Sunnyvale Tx 75182				
Principal occupation / Job title (See Instructions) retired			Employer (See Instructions) N/A		
Date 3/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Elmke			Amount of contribution (\$) \$ 50.00	
	Contributor address; City; State; Zip Code 1010 Quiet Shadows St Longview Tx 75604				
Principal occupation / Job title (See Instructions) retired			Employer (See Instructions) N/A		
Date 3/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven Baker			Amount of contribution (\$) \$ 100.00	
	Contributor address; City; State; Zip Code 6315 Falcon Crest Court Sachse Tx 75048				
Principal occupation / Job title (See Instructions) retired			Employer (See Instructions) N/A		
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: 13
2 FILER NAME Stephane Rovel		3 Filer ID (Ethics Commission Filers)
4 Date 3/12/2025	5 Full name of contributor Peter Pachikara <input type="checkbox"/> out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code 420 Mustang Dr. Sunnyvale TX 75182	7 Amount of contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Financial Analyst II		9 Employer (See Instructions) UT Southwestern
Date 3/12/2025	Full name of contributor Lam Pham <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code 5310 Lee Henson Ln Sachse TX 75048	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Mechanic		Employer (See Instructions) Self-employed
Date 3/12/2025	Full name of contributor Zach Garcia <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code 101 Woodcrest Lane Coppell TX 75044	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Lincoln Capital Management
Date 3/12/2025	Full name of contributor Patrick Joseph <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code 522 Palm Desert Drive Garland TX 75044	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Analog Circuit Designer		Employer (See Instructions) Texas Instruments
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 13
2 FILER NAME Stephane Rowe		3 Filer ID (Ethics Commission Filers)
4 Date 3/13/2025	5 Full name of contributor Jerry Cap <input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 621 Levant Ln Plano TX 75094		
8 Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) N/A
Date 3/13/2025	Full name of contributor Logan Cornelius <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code 12839 Pennystone Dr. Farmers Bk. TX 75244		
Principal occupation / Job title (See Instructions) Director of Technology		Employer (See Instructions) GigStream
Date 3/13/2025	Full name of contributor Mark Ashby <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$40.00
Contributor address; City; State; Zip Code 770 Cantegat St Dallas TX 75204		
Principal occupation / Job title (See Instructions) Orthodontic Resident		Employer (See Instructions) Texas A&M School of Dentistry
Date 3/13/2025	Full name of contributor Michael Wright <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 4715 Amberley Dr. Dallas TX 75243		
Principal occupation / Job title (See Instructions) RTI Coordinator		Employer (See Instructions) Dallas College
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 13
2 FILER NAME Stephane Bueh		3 Filer ID (Ethics Commission Filers)
4 Date 3/13/2025	5 Full name of contributor Felix Hsu <input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code 6620 Basalt Dr. Plano TX 75024	
8 Principal occupation / Job title (See Instructions) Owner/manager		9 Employer (See Instructions) Astral International LLC
Date 3/13/2025	Full name of contributor Chantel Jones <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$30.00
	Contributor address; City; State; Zip Code 3418 Meadow Oaks Dr. Garland TX 75043	
Principal occupation / Job title (See Instructions) Impact Architect		Employer (See Instructions) Dallas College
Date 3/13/2025	Full name of contributor Sherry Leonard-Foots <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2918 Club Hill Dr. Garland TX 75043	
Principal occupation / Job title (See Instructions) RtE Coordinator		Employer (See Instructions) Dallas College
Date 3/13/2025	Full name of contributor Nina Le <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 9602 W Pedernales River Dr. Cypress TX 77433	
Principal occupation / Job title (See Instructions) Business Manager		Employer (See Instructions) Phong Le, D.O. PLLC
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages, Schedule A1: 13
2 FILER NAME Stephane Rowelo		3 Filer ID (Ethics Commission Filers)
4 Date 3/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vu Cao 6 Contributor address; City; State; Zip Code 3202 Diana Dr. Rowlett, TX 75089	7 Amount of contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Stylist		9 Employer (See Instructions) Jose Eber Plano
Date 3/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashley Hsu Contributor address; City; State; Zip Code 5060 Addison Cir Addison, TX 75001	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Baylor University Medical Center
Date 3/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlotte Navarro Contributor address; City; State; Zip Code 1960 Quartz Trail Heathland, TX, 75126	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sr. Manager of Global Programs		Employer (See Instructions) Rise against Hunger
Date 3/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amanda Lam Contributor address; City; State; Zip Code 2667 Meandering Way Marietta, GA, 30064	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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: 13
2 FILER NAME Stéphane Rovel		3 Filer ID (Ethics Commission Filers)
4 Date 3/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) matthew Yorkum	7 Amount of contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code 317 Melshire St Sunnyvale tx 75182		
8 Principal occupation / Job title (See Instructions) Software Developer		9 Employer (See Instructions) Federal Directors Life
Date 3/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trent Price	Amount of contribution (\$) \$20.00
Contributor address; City; State; Zip Code 5225 Verde Valley Ln Dallas tx 75254		
Principal occupation / Job title (See Instructions) Success Coach		Employer (See Instructions) Dallas College
Date 3/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Davis	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3718 Roylene Ct Dickinson tx 77534		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 3/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Van Dyke	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code 6870 Gateway Dr. Garland tx 75044		
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) REES
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: 1
2 FILER NAME Stephane Porelo		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 2/12/25	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephane Porelo	9 Loan Amount (\$) \$500.00
6 Is lender a financial institution? Y N	8 Lender address; City; State; Zip Code 5709 Indian Hills Dr. Garland tx 75044	10 Interest rate —
		11 Maturity date —
12 Principal occupation / Job title (See Instructions) Retired		13 Employer (See Instructions) N/A
14 Description of Collateral <input type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" 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 <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.		

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
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 F1: <div style="text-align: center;">4</div>		2 FILER NAME Stephane Laurent Pouch		3 Filer ID (Ethics Commission Filers)	
4 Date 2/14/2025		5 Payee name Precision Reprographics			
6 Amount (\$) \$580.22		7 Payee address; 3102 Benton St.		City; Garland	State; TX Zip Code 75042
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Yard Signs		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 2/21/2025		Payee name TDP Van			
Amount (\$) \$395.00		Payee address; 314 Highland Blvd		City; Austin	State; TX Zip Code 78752
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other		Description Canvassing Software		
	<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					
Date 3/14/2025		Payee name Precision Reprographics			
Amount (\$) \$71.27		Payee address; 3102 Benton St		City; Garland	State; TX Zip Code 75042
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description Signs		
	<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					

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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 Stéphane Laurent Poreb		3 Filer ID (Ethics Commission Filers)	
4 Date 3/6/2025		5 Payee name Hostinger Hosting			
6 Amount (\$) \$51.03		7 Payee address; City; State; Zip Code Jonavos g. 60C, Kaunas 44192, Lithuania			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description website		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> 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 3/7/2025		Payee name Lowe's			
Amount (\$) \$43.71		Payee address; City; State; Zip Code 2949 N. George Bush Freeway, Garland, TX 75640			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other		Description t- posts for signs		
	<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	
Date 3/7/2025		Payee name Tractor Supply Co			
Amount (\$) \$311.11		Payee address; City; State; Zip Code 900 Westgate Way Wylie TX 75098			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other		Description t- posts for signs		
	<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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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Stéphane Laurent Poveb		3 Filer ID (Ethics Commission Filers)	
4 Date 3/11/2025		5 Payee name TDP VAN			
6 Amount (\$) \$360.00		7 Payee address; City; State; Zip Code 314 Highland Blvd Austin TX 78752			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other		(b) Description Canvassing Software		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 3/12/2025		Payee name Tractor Supply Co			
Amount (\$) \$110.20		Payee address; City; State; Zip Code 900 Westgate Way Lylic TX 75098			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other		Description t-poses for signs		
	<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					
Date 3/14/2025		Payee name Precision Reprographics			
Amount (\$) \$1,140.52		Payee address; City; State; Zip Code 3102 Benton St Garland TX 75042			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description Signs		
	<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					
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 <i>Stephane Laurent Rouelo</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>3/24/2025</i>		5 Payee name <i>Pay pal</i>			
6 Amount (\$) <i>\$57.35</i>		7 Payee address; City; State; Zip Code <i>2211 N 1st St, San Jose, CA 95131</i>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Fees</i>		(b) Description <i>Service fees</i>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> 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		
	<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	

Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		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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