

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19** FILER NAME**20** Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$54,257.59
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$50.00
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$50.00
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$50.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$53,952.75
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$50.00
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$50.00
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$50.00
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$57,358.82
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$50.00
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$50.00
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$50.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5
2 FILER NAME James R DePiazza		3 Filer ID (Ethics Commission Filers)
4 Date 07/26/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apartment Association of Great Dallas-PAC 6 Contributor address; City; State; Zip Code [REDACTED] Dallas TX 75240	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Oglesby Contributor address; City; State; Zip Code [REDACTED] Little Elm TX 75068	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe McCourry Contributor address; City; State; Zip Code [REDACTED] The Colony TX 75056	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fred Rogers Contributor address; City; State; Zip Code [REDACTED] Frisco TX 75036	Amount of contribution (\$) \$104.17
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5
2 FILER NAME James R DePiazza		3 Filer ID (Ethics Commission Filers)
4 Date 08/19/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glyn King 6 Contributor address; City; State; Zip Code [REDACTED] Frisco TX 75033	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rick Muse Contributor address; City; State; Zip Code [REDACTED] Justin TX 76247	Amount of contribution (\$) \$104.17
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Frazier Contributor address; City; State; Zip Code [REDACTED] Frisco TX 75034	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Stapleton Contributor address; City; State; Zip Code [REDACTED] Little Elm TX 75068	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5
2 FILER NAME James R DePiazza		3 Filer ID (Ethics Commission Filers)
4 Date 08/23/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suman Chepuri 6 Contributor address; City; State; Zip Code [REDACTED] The Colony TX 75056	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Ensweiler Contributor address; City; State; Zip Code [REDACTED] The Colony TX 75056	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Indu Realty LLC Contributor address; City; State; Zip Code [REDACTED] The Colony TX 75056	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karen Perlstein Contributor address; City; State; Zip Code [REDACTED] Frisco TX 75036	Amount of contribution (\$) \$52.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5
2 FILER NAME James R DePiazza		3 Filer ID (Ethics Commission Filers)
4 Date 08/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson Vela, LLP 6 Contributor address; City; State; Zip Code [REDACTED] The Colony TX 75056	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francisco Ramirez III Contributor address; City; State; Zip Code [REDACTED] The Colony TX 75056	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Boyer Contributor address; City; State; Zip Code [REDACTED] The Colony TX 75056	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roland Sparks Contributor address; City; State; Zip Code [REDACTED] The Colony TX 75056	Amount of contribution (\$) \$156.25
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5
2 FILER NAME James R DePiazza		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirk Mikulec 6 Contributor address; City; State; Zip Code [REDACTED] The Colony TX 75056	7 Amount of contribution (\$) \$101.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denton Republican Women's Club Contributor address; City; State; Zip Code [REDACTED] Denton TX 76202	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dody Brigadier Contributor address; City; State; Zip Code [REDACTED] Frisco TX 75036	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> 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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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: 2		2 FILER NAME James R DePiazza		3 Filer ID (Ethics Commission Filers)	
4 Date 07/29/2022		5 Payee name Vista Print			
6 Amount (\$) \$427.47		7 Payee address; City; State; Zip Code 275 Wyman Street Waltham MA 02451			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) PrintingExpense		(b) Description <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 08/03/2022		Payee name Vista Print			
Amount (\$) \$219.15		Payee address; City; State; Zip Code 275 Wyman Street Waltham MA 02451			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) PrintingExpense		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 09/07/2022		Payee name Vista Print			
Amount (\$) \$377.67		Payee address; City; State; Zip Code 275 Wyman Street Waltham MA 02451			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) PrintingExpense		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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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: 2	2 FILER NAME James R DePiazza	3 Filer ID (Ethics Commission Filers)		
4 Date 10/04/2022	5 Payee name PostcardMania			
6 Amount (\$) \$2,913.92	7 Payee address; City; State; Zip Code 2145 Sunnysdale Blvd Clearwater FL 33765			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) AdvertisingExpense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	<table style="width:100%; border:none;"> <tr> <td style="width:50%; border:none;">Candidate / Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
Candidate / Officeholder name	Office sought	Office held		
<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Date</td> <td style="width:80%; border:none;">Payee name</td> </tr> </table>			Date	Payee name
Date	Payee name			
<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Amount (\$)</td> <td style="width:80%; border:none;">Payee address; City; State; Zip Code</td> </tr> </table>			Amount (\$)	Payee address; City; State; Zip Code
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		
	<table style="width:100%; border:none;"> <tr> <td style="width:50%; border:none;">Candidate / Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
Candidate / Officeholder name	Office sought	Office held		
<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Date</td> <td style="width:80%; border:none;">Payee name</td> </tr> </table>			Date	Payee name
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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		
	<table style="width:100%; border:none;"> <tr> <td style="width:50%; border:none;">Candidate / Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
Candidate / Officeholder name	Office sought	Office held		

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POLITICAL EXPENDITURES MADE 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: 1		2 FILER NAME James R DePiazza		3 Filer ID (Ethics Commission Filers)	
4 Date 07/30/2022		5 Payee name A2D Development			
6 Amount (\$) \$500.00 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 713 Queens Dr Waxahachie TX 75165			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) AdvertisingExpense		(b) 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 08/11/2022		Payee name PostcardMania			
Amount (\$) \$3,658.82 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 2145 Sunnysdale Blvd, , Clearwater FL 33765 FL			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) PrintingExpense		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 10/04/2022		Payee name PostcardMania			
Amount (\$) \$3,200.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 2145 Sunnysdale Blvd, , Clearwater FL 33765 FL			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) AdvertisingExpense		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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