CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filens)	2 Total pages filed: 7	
3 CANDIDATE/ OFFICEHOLDER	MS/MRS/MR FIRST Rob	MI	OFFICE USE ONLY	
NAME	NICKNAME LAST	SUFFIX	Date Received	
	Altman	II		
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX; APT / SUITE #; C	STATE; ZIP CODE TX 75036		
ADDRESS Change of Address				
5 CANDIDATE/ OFFICEHOLDER	AREA CODE PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmanked	
PHONE			Date Hand delivered of Date Positioned	
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST	мі	Receipt # Amount \$	
NAME	Shelley NICKNAME LAST	C	Date Processed	
	Altman		Date Imaged	
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SI	JITE#; CITY; STATE;	ZIP CODE	
TREASURER ADDRESS		Frisco TX	75036	
(Residence or Business)				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION		
9 REPORT TYPE	January 15 🕡 30th day before e	lection Runoff	15th day after campaign treasure rappointment Office holder Only	
	July 15 Sth daybefore ele	ction Exceeded \$500 limit	Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year	Month	Day Year	
	01 /01 /2022	THROUGH 01	20 /2022	
11 ELECTION	ELECTION DATE	ELECTION TYPE		
	Month Day Year Primary	Runoff Other Description		
	03 /01 /2022 General	Special		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known		
		County Commissioner P	recinct #2	
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME			15 Filer ID (Ethics Commission Filers)		
R ob Altman					
16 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				
	SPECIFIC	COMMITTEE ADDRESS			
	Пакальо				
		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages					
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEM			
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$4,400.00		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$.00 4. TOTAL POLITICAL EXPENDITURES \$502.08				
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$5,407.17				
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$15,300.54				
18 AFFIDAVIT					
I swear, or affirm, under peperaty of partitive det the accompanying report is true and correct and includes all includes					
		01/31/22	? - 10:51 PM		
		Signalive of Sa	ndidate or Office holder		
AFFIX NOTARY STAMP/SEALABOVE					
Sworn to and subscribed before me, by the said , 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					
organizate of officer administering call the officer administering call the officer administering call					

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FIL	19 FILERNAME 20 Filer ID (Ethics Co			
	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			
1.	~	\$\$4,400.00		
2.		\$\$0.00		
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS			\$\$0.00
4.	SCHEDULE E: LOANS			\$\$0.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			\$\$502.08
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$\$0.00	
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			\$\$0.00
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		
9.		SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	\$\$0.00	
10.		SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	\$\$0.00	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	\$\$0.00	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT RETURNED TO FILER	\$\$0.00	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 2			
2 FILER NAME Rob Altman	3 Filer ID (Ethics Commission Filers)			
4 Date 5 Full name of contributor out-of-state PAC (ID#:) Rob Cox 6 Contributor address; City; State; Zip Code Frisco TX 75036	7 Amount of contribution (\$) \$50.00			
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Sales Specialist Amazon				
Date Full name of contributor out-of-state PAC (ID#:) 01/06/2022 Michael Shasteen Contributor address; City; State; Zip Code Frisco TX 75036	Amount of contribution (\$) \$100.00			
Principal occupation / Job title (See Instructions) Employer (See Instruct Production Manager Supreme Lending	ions)			
Date Full name of contributor	Amount of contribution (\$) \$250.00			
Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired	tions)			
Date Full name of contributor out-of-state_PAC (ID#:) 01/13/2022 Sam Fleitman Contributor address; City; State; Zip Code Lakewood TX 75068	Amount of contribution (\$) \$3,000.00			
Principal occupation / Job title (See Instructions) Employer (See Instructions) Chief Operating Officer Softlayer Technologie				

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	1 Total pages Schedule A1: 2		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Rob Altman				
	T			
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)	
01/19/2022	James C hristian		\$1,000.00	
	le a carrena e e e e e carre a c			
	6 Contributor address; City; State			
	Houston T	X 77002		
9 Principal accur	pation / Job title (See Instructions)	9 Employer (See Instruc	tion of	
	pation / 300 title (See Instructions)			
Partner		Christian, Smith, & Je	well, LLP	
D 1	Full name of contributor Quit-of-state PAC	(ID#:)		
Date	Pull fame of contributor aut-ot-state PAC	, (ID#:	Amount of contribution (\$)	
	Contributor address; City; State	e; Zip Code		
	City, State	s, zip code		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)	
Date	Full name of contributor 🔲 out-of-state PAC	(ID#:)	Amount of contribution (\$)	
	- g			
	Contributor address; City; State	; Zip Code		
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)	
	Contributor address; City; State	e; Zip Code		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)	
	ATTACH ADDITIONAL CODICS C	AE TUIGGOUEDI II E AG NI	EDED	
	ATTACH ADDITIONAL COPIES O If contributor is out-of-state PAC, please see inst			
	in contributor is out-or-state rate, please see first	raction game to radditional	reporting requirements.	

Forms provided by Texas Ethics Commission

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

The Instruction Guide explains how to complete this form.

Advertising Expense
Accounting Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Office holder/Politica IC ommittee
GeditCard Payment

1 Total pages Schedule F1: 2 FILER NAME

Event Expense Fees Food Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbusement Office Overhead Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Transel In District
Transel Out Of District
Other (anter a category not listed above)

3 Filer ID (Ethics Commission Filers)

Rob Altman 4 Date 5 Payee name 01/05/2022 Community Impact 6 Amount (\$) 7 Payee address; City; State; Zip Code \$250.00 75034 7460 Warren Parkway Frisco TX #160 (b) Description (a) Category (See Categories listed at the top of this schedule) 8 Check if traveloutside of Texas. Complete Schedule T. AdvertisingExpense PURPOSE OF EXPENDITURE Check if Austin, TX, office hobler living expense Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to be nefit C/OH Payee name 01/18/2022 The Colony Cafe City; State; Zip Code Amount (\$) Payee address; \$30.00 4750 S Colony Blvd The Colony TX 75056 #120 Category (See Categories listed at the top of this schedule) Description ☐ Check, if traive loutside of Texas. Complete Schedule T. PURPOSE Food BeverageExpense OF ☐ Check if Austin, TX, office holder living expense EXPENDITURE Candidate / Office holder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

01/18/2022	Barney's Brunch Hou	se			
Amount (\$)	Payee address;	City; State;	Zip Code		
\$55.00	5480 FM 423 #700	Frisco	TX	75034	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food BeverageExpense			Description Check il noveloutside of Texas.0 Check il Austin, TX, officeho	•
Complete ONLY if direct expenditure to benefit C/OR		lder name		Office sought	Office held

Date

Payee name

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Domitions Made By Candidate/Office holder/PoliticalCommittee Certificard Payment

Event Expense Fees Food Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbusement Office Overhead Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Tiansportation Equipment & Related Expense
Travel In District
Travel Out 01 District
Other (anter a category not listed above)

CreditCard Payment	The Instruction Guide explains how to c	om plete this form.	
1 Total pages Schedule F1: 2	2 FILER NAME Rob Altman	3 Filer ID (Ethics Commission Filers)	
4 Date 01/19/2022	5 Payee name Eventhaus		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$167.08	6 Dominion Circle Frisco TX	75033	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if waveloutside of Texas. Complete Schedule T. Check if Austin, TX, office hotter fiving expense	
 Complete ONLY if direct expenditure to be nefit C/OF 	Candidate / Office holder name H	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 il traveloutside of Texas. Complete Schedule T. Check if Austin, TX, office holder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Office holder name	Office sought Office held	
Date	Payee name		
Amount (\$)	Payee addiess; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description Check il haveloutside of Texas. Complete Schedule T. Check il Austin, TX, officeholden fiving expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			