

Official Filing Authority of Harris County Isabel Longoria Elections Administrator

Campaign Finance Report

2022113

Received By Clerk:

01/18/2022

File Date:

January 18, 2022

Office:

FileNo:

County Treasurer

Candidate:

Osborne, Matthew

Treasurer:

Hamilton, Merrick

Category:

Contributions And Expenditures (COH/JCOH)

Elections Administrator Harris County, TX

Delivered By:

Personal Appearance

Type:

COR

Harris County No Fee

FORM C/OH **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID Total pages filed The C/OH Instruction Guide explains how to complete this form. 11 CANDIDATE / MS / MRS / MR **FIRST** М OFFICE USE ONLY **OFFICEHOLDER** Matthew NAME Date Received **NICKNAME** LAST **SUFFIX** Osborne CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE Date Hand-delivered or Date Postmarked **OFFICEHOLDER** PO Box 6514 MAILING Amount **ADDRESS** Change of Address Houston, TX 77265 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST **TREASURER** NAME Merrick **NICKNAME** LAST SUFFIX Hamilton CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 3002 St Emanuel St **ADDRESS** Houston Tx 77004 (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION TREASURER** PHONE 713-545-9528 8 REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit 9 PERIOD Month Day Year Month Day Year COVERED 07/01/2021 **THROUGH** 12/31/2021 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year X Primary Runoff Other 03/01/2022 General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) County Treasurer Harris **County Treasurer GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTAL S

FORM C/OH COVER SHEET PG 2

			2 of 11
Osborne, Matthew		14 Filer ID	
candidate / officeholder.	These expenditures may have been made without	the candidate's or officel	nolder's knowledge or
COMMITTEE TYPE GENERAL	COMMITTEE NAME		
SPECIFIC	COMMITTEE ADDRESS		
	COMMITTEE CAMPAIGN TREASURER NAME		
	COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
			\$ 0.00
		S)	\$ 2,440.00
			\$ 0.00
			\$ 622.36
REPORTING PE	RIOD		\$ 2,202.94
		S OF THE LAST DAY	\$ 0.00
Notary Public, State of 1 Comm. Expires 07-29-2 Notary ID 13076023 DTARY STAMP / SEAL AB	true and correct and includes a under Title 15, Election Code. Exas OVE aid Muthew OSborne ertify which, witness my hand and seal of office.	of Candidate or Officehold	be reported by me
	This box is for notice of candidate / officeholder. consent. Candidates and COMMITTEE TYPE GENERAL SPECIFIC 1. TOTAL UNITEM OR GUARANTE 2. TOTAL POLITIC (OTHER THAN I as TOTAL POLITIC REPORTING PECTAL PRINCIP OF THE REPORTION PECTAL PECTAL PRINCIP OF THE REPORTION PECTAL PE	This box is for notice of political contributions accepted or political expendit candidate / officeholder. These expenditures may have been made without consent. Candidates and officeholders are required to report this informatic consent. Candidates and officeholders are required to report this informatic consent. Candidates and officeholders are required to report this informatic consent. Candidates and officeholders are required to report this informatic consent. Candidates and officeholders are required to report this informatic consent cons	This box is for notice of political contributions accepted or political expenditures made by political contributions and pave been made without the candidates or officed consent. Candidates and officeholders are required to report this information only if they receive not consent. Candidates and officeholders are required to report this information only if they receive not consent. Candidates and officeholders are required to report this information only if they receive not consent. Candidates are officeholders. COMMITTEE NAME COMMITTEE ADDRESS 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL POLITICAL CONTRIBUTIONS OR GUARANTEES OF LOANS) 4. TOTAL POLITICAL EXPENDITURES 5. TOTAL POLITICAL EXPENDITURES 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD 1. Iswear, or affirm, under penalty of perjury, that the accuracy and correct and includes all information required to under Title 15, Election Code. NATALY RAMIREZ NOTARY STAMP / SEAL ABOVE CODE OF THE REPORTING PERIOD COMMITTEE NAME COMMITTEE NAME Iswear, or affirm, under penalty of perjury, that the accuracy and correct and includes all information required to under Title 15, Election Code. COMMITTEE NAME COMMITTEE NAME Iswear, or affirm, under penalty of perjury, that the accuracy and correct and includes all information required to under Title 15, Election Code. COMMITTEE NAME CO

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 11 19 Filer ID 18 FILER NAME Osborne, Matthew 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1 MONETARY POLITICAL CONTRIBUTIONS \$ 2,440.00 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE E: LOANS X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 224.00 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS 7. \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 398.36 \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

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Version V1.1.ab979f02

Forms provided by Texas Ethics Commission

MONET	ARY POLITICAL CONTRIBUTIO	JNS	SCHEDULE A1
The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1. Sch: 1/3 Rpt: 4/11
2 FILER NAME Osborne, Ma		3 Filer ID	
4 Date 12/17/2021	5 Full name of contributor	7 Amount of Contribution (\$) \$40.00	
	Houston, TX 77007		
NA	ipation / Job title (See Instructions)	9 Employer (See Instructions Retired	
Date 12/28/2021	Full name of contributor out-of-state PAC (ID#- Goldberg, David Contributor address; City; State; Zip Code 3107 Fairhope St		Amount of Contribution (\$) \$25.00
	Houston , TX 77025		
Principal occu Priest	pation / Job title (See Instructions)	Employer (See Instructions St Mark's Episcopal	s)
Date 12/31/2021	Full name of contributor out-of-state PAC (ID#_Lewis, Olen Contributor address; City; State; Zip Code 12507 Safeguard St Houston, TX 77047		Amount of Contribution (\$) \$50.00
Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions N/A	I
Date 12/28/2021	Full name of contributor out-of-state PAC (ID#_Milburn, Ruth Contributor address, City; State; Zip Code 2308 Triway Ln Houston, TX 77043		Amount of Contribution (\$) \$50.00
Principal occu Compliance	pation / Job title (See Instructions) Analyst	Employer (See Instructions BakerRipley	5)
Date 09/19/2021	Full name of contributor out-of-state PAC (ID#:_ Obregon, Alexander Contributor address, City; State; Zip Code 2058 Fanin Station N Houston, TX 77045		Amount of Contribution (\$) \$250.00
Principal occu Deputy City	upation / Job title (See Instructions) Controller	Employer (See Instructions City of Houston	5)
		I	

	ARY POLITICAL CONTRIBUTIO	ONS	SCHEDULE A1
The Instruc	tion Guide explains how to complete this fo	orm.	1 Total pages Schedule A1. Sch: 2/3 Rpt: 5/11
2 FILER NAME	Hhow.		3 Filer ID
Osborne, Mai			
12/25/2021	 Full name of contributor		7 Amount of Contribution (\$) \$125.0
	735 Spring, TX 77380		
8 Principal occup Manager	pation / Job title (See Instructions)	Employer (See Instructions Cormier's Kitchen	
Date 12/25/2021	Full name of contributor out-of-state PAC (ID#_ Osborne, Sandra Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$350.0
	24323 Glen Loch Dr		
Denoinal again	Spring, TX 77380	E	
Customer Se	pation / Job title (See Instructions) rvice	Employer (See Instructions HEB	
Date Full name of contributor out-of-state PAC (ID# 12/31/2021 Pardo, Amos Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$100.0
	13414 Babbitt Ct Houston, TX 77034		
Principal occup Lawyer	pation / Job title (See Instructions)	Employer (See Instructions The Selesky Law Firm)
Date 11/03/2021			Amount of Contribution (\$) \$1,000.0
	#6 Houston, TX 77006		
Principal occup Engineer	pation / Job title (See Instructions)	Employer (See Instructions Brown and Gay Enginee	·
		DIOWIT AND GAY ENGINEE	
Date Full name of contributor out-of-state PAC (ID# 12/25/2021 Smith, Kathi			Amount of Contribution (\$) \$350.0
	Contributor address; City; State; Zip Code 3415 Clear Water Park Dr Katy, TX 77450		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)
Retired		n/a	
Tormo provida d	by Texas Ethics Commission www.ethics	s.state.tx.us	Version V1.1.ab979f

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1 Sch: 3/3 Rpt: 6/11
2 FILER NAME	3 Filer ID
Osborne, Matthew	
4 Date 5 Full name of contributor out-of-state PAC (ID#) 12/21/2021 Stansbury, Brian	7 Amount of Contribution (\$) \$50.00
6 Contributor address, City, State; Zip Code	\$30.00
1719 N Barton St	
Arlingten , VA 22201	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions	s)
Attorney King & Spalding	
Date Full name of contributor out-of-state PAC (ID#)	Amount of Contribution (\$)
12/21/2021 West, Chase	\$50.00
Contributor address; City; State; Zip Code	
22811 Braken Manor Ln	
Katy , TX 77449	
Principal occupation / Job title (See Instructions) Audio Producer Employer (See Instructions) Audio Realm Studios	s)
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political (Credit Card Payment			Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide e	Polling Exp se Printing Ex Salaries/M	pense ages/Contract Labor	Travel on District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAI		-	-	3 Filer ID
_	Sch: 1/4 Rpt: 7/11	Osborne,				3 FILET ID
4	Date	5 Payee nan	ne			
	07/29/2021	Nationbui				
6	Amount (\$)	7 Payee add	ress, City;	State; Zip Co	de	
	\$29.00	520 S Gr				
		Los Ange	les, CA 90071			
8	PURPOSE OF EXPENDITURE		(See Categories listed at the top on the second sec	of this schedule)		l outside of Texas, Complete Schedule T n, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		Officeholder name	Office sou	ght	Office held
	Date	Payee nan	ne			
	08/30/2021	Nationbu	lder			
Т	Amount (\$)	Payee ado	ress; City;	State, Zip Co	de	
	\$29.00	520 S Gr	and Ave			
		Los Ange	les, CA 90071			
	PURPOSE OF	(a) Category	(See Categories listed at the top	of this schedule)	(b) Description	
	EXPENDITURE	Advertisir	ng Expense			I outside of Texas. Complete Schedule T. n, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		Officeholder name	Office sou	ght	Office held
	Date	Payee nan	ne			
	09/29/2021	Nationbui	lder			
	Amount (\$) \$29.00	Payee add 520 S Gr		State; Zip Co	de	
		Los Ange	les, CA 90071			
	PURPOSE OF EXPENDITURE		(See Categories listed at the toping Expense	of this schedule)	<u></u>	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OI		Officeholder name	Office sou	ght	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Off Food/Beverage Expense Po Gift/Awards/Memorials Expense Pri	fice Overhe Illing Expeninting Expe Ilaries/Wag	nse es/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:	2	FILER NAME		3	Filer ID
	Sch: 2/4 Rpt: 8/11		Osborne, Matthew			
4	Date	5	Payee name		<u></u>	
	10/29/2021		Nationbuilder			
6	Amount (\$)	7	Payee address; City; State, Z	ip Code	:	
	\$29.00		520 S Grand Ave Los Angeles, CA 90071			
Ļ	BURDOCE	(-)		10	1/2	
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule Advertising Expense	e) (D		side of Texas. Complete Schedule T. X, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office	e sough	t	Office held
Г	Date		Payee name			
	11/29/2021		Nationbuilder			
	Amount (\$)		Payee address; City; State; Z	ip Code		
	\$29.00		520 S Grand Ave			
			Los Angeles, CA 90071			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule	e) (b	Description	
	EXPENDITURE		Advertising Expense		=	side of Texas. Complete Schedule T X, officeholder living expense
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Γ	Date	Γ	Payee name			
L	12/29/2021		Nationbuilder			
	Amount (\$) \$29.00		Payee address, City; State; Z 520 S Grand Ave Los Angeles, CA 90071	ip Code		•
	PURPOSE OF EXPENDITURE	(a	Category (See Categories listed at the top of this scheduling Advertising Expense	e) (t		iside of Texas. Complete Schedule T X, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name Offic	e sough	nt	Office held

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Expens Printing Expen Salaries/Wage	se s/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
			The Instruction Guide explain	s how to compl	· y · · ·	
1	Total pages Schedule F1: Sch: 3/4 Rpt: 9/11	2 FILER NAMI Osborne, N			3	Filer ID
4	Date 07/30/2021	5 Payee name Wells Farg			·······	
6	Amount (\$) \$10.00	7 Payee addre 1500 Waug Houston , 1	gh Dr	te; Zıp Code		
8	PURPOSE OF EXPENDITURE		See Categories listed at the top of this s	chedule) (b)		ide of Texas Complete Schedule T. officeholder tiving expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		iceholder name	Office sought		Office held
	Date	Payee name				
	08/31/2021	Wells Farg	o Bank		7	
	Amount (\$)	Payee addre	ess, City; Stat	te; Zıp Code		
	\$10.00	1500 Waug	gh Dr			
		Houston , 1				
	PURPOSE OF EXPENDITURE	(a) Category (s	Gee Categories listed at the top of this s /Banking	chedule) (b)		alde of Texas Complete Schedule T , officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sought		Office held
	Date 09/30/2021	Payee name Wells Farg				
	Amount (\$) \$10.00	Payee addre 1500 Waug Houston , T	gh Dr	te; Zıp Code		
	PURPOSE OF EXPENDITURE	(a) Category (s Accounting	See Categories listed at the top of this s /Banking	chedule) (b)		side of Texas. Complete Schedule T. , officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sought		Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Co	The Instruction Gu			/ages/C	6/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME	-			3 Filer ID
	Sch: 4/4 Rpt: 10/11		Osborne, Matthew				
4	Date	5	Payee name				
	10/29/2021		Wells Fargo Bank				
6	Amount (\$)	7	Payee address, City,	State	; Zıp Co	de	
	\$10.00		1500 Waugh Dr				
			Houston, TX 77006				
8	PURPOSE	(a)	Category (See Categories listed at ti	he top of this sch	nedule)	(b)	Description
ĺ	OF EXPENDITURE		Accounting/Banking	,	,	ſ	Check if travel outside of Texas. Complete Schedule T.
	LXI ENDITORE						Check if Austin, TX, officeholder living expense
						I	fee
Ļ	Complete ONLY if direct		Candidate/Officeholder name		0#4		Office held
9	Complete ONLY if direct expenditure to benefit C/OI		Januidate/Onicenoider name	,	Office sou	gni	Office neid
=	5-1-						
	Date 11/30/2021		Payee name				
			Wells Fargo Bank		40	匚	
	Amount (\$)		Payee address, City;	State	; Zıp Co	de	
	\$10.00		1500 Waugh Dr				
			Houston , TX 77006				
ı	PURPOSE OF	(a)	Category (See Categories listed at the	he top of this sch	nedule)	(b) [Description Check if travel outside of Texas, Complete Schedule T.
ŀ	EXPENDITURE		Accounting/Banking				Check if Austin, TX, officeholder living expense
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Г	Complete ONLY if direct		Candidate/Officeholder name	4	Office sou	ght	Office held
	expenditure to benefit C/OI	1					
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Advertising Expense Event Expense Solicitation/Fundraising Expense Accounting/Banking Consulting Expense Transportation Equipment & Related Expense Travel in District Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 1/1 Rpt: 11/11 Osborne, Matthew 4 Date Payee name 11/01/2021 M3 Graphics 6 Amount (\$) Payee address; City; State; Zip Code \$398.36 11730 Wilcrest Dr Reimbursement from political contributions intended Houston, TX 77099 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T OF Check if Austin, TX, officeholder living expense Advertising Expense EXPENDITURE Campaign Lit Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH