



Official Filing Authority of Harris County  
Isabel Longoria  
Elections Administrator

### Campaign Finance Report



Elections Administrator  
Harris County, TX

**FileNo:** 2022113  
**Received By Clerk:** 01/18/2022  
**File Date:** January 18, 2022  
**Office:** County Treasurer  
**Candidate:** Osborne, Matthew  
**Treasurer:** Hamilton, Merrick  
**Category:** Contributions And Expenditures (COH/JCOH)  
**Delivered By:** Personal Appearance  
**Type:** COR

Harris County No Fee

**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: 11	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Matthew	MI	<b>OFFICE USE ONLY</b> Date Received	
	NICKNAME	LAST Osborne	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 6514  Houston, TX 77265			ZIP CODE	
	Date Hand-delivered or Date Postmarked			Receipt #	Amount
	Date Processed			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Merrick	MI		
	NICKNAME	LAST Hamilton	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 3002 St Emanuel St Houston Tx 77004			APT / SUITE #;	CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
		713-545-9528			
8 REPORT TYPE	<input checked="" 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 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
			07/01/2021		12/31/2021
10 ELECTION	ELECTION DATE Month Day Year			ELECTION TYPE	
	03/01/2022			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) County Treasurer Harris			12 OFFICE SOUGHT (if known) County Treasurer	

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

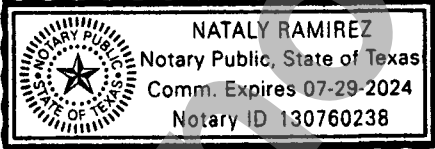
**FORM C/OH  
COVER SHEET PG 2**  
2 of 11

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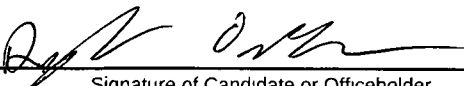
<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's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

<b>16 CONTRIBUTION TOTALS</b>	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)	\$ 2,440.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 622.36
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,202.94
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**17 AFFIDAVIT**

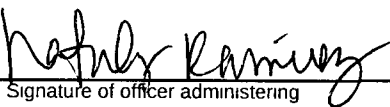


I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Matthew Osborne, this the 18<sup>th</sup> day of January, 2022, to certify which, witness my hand and seal of office.

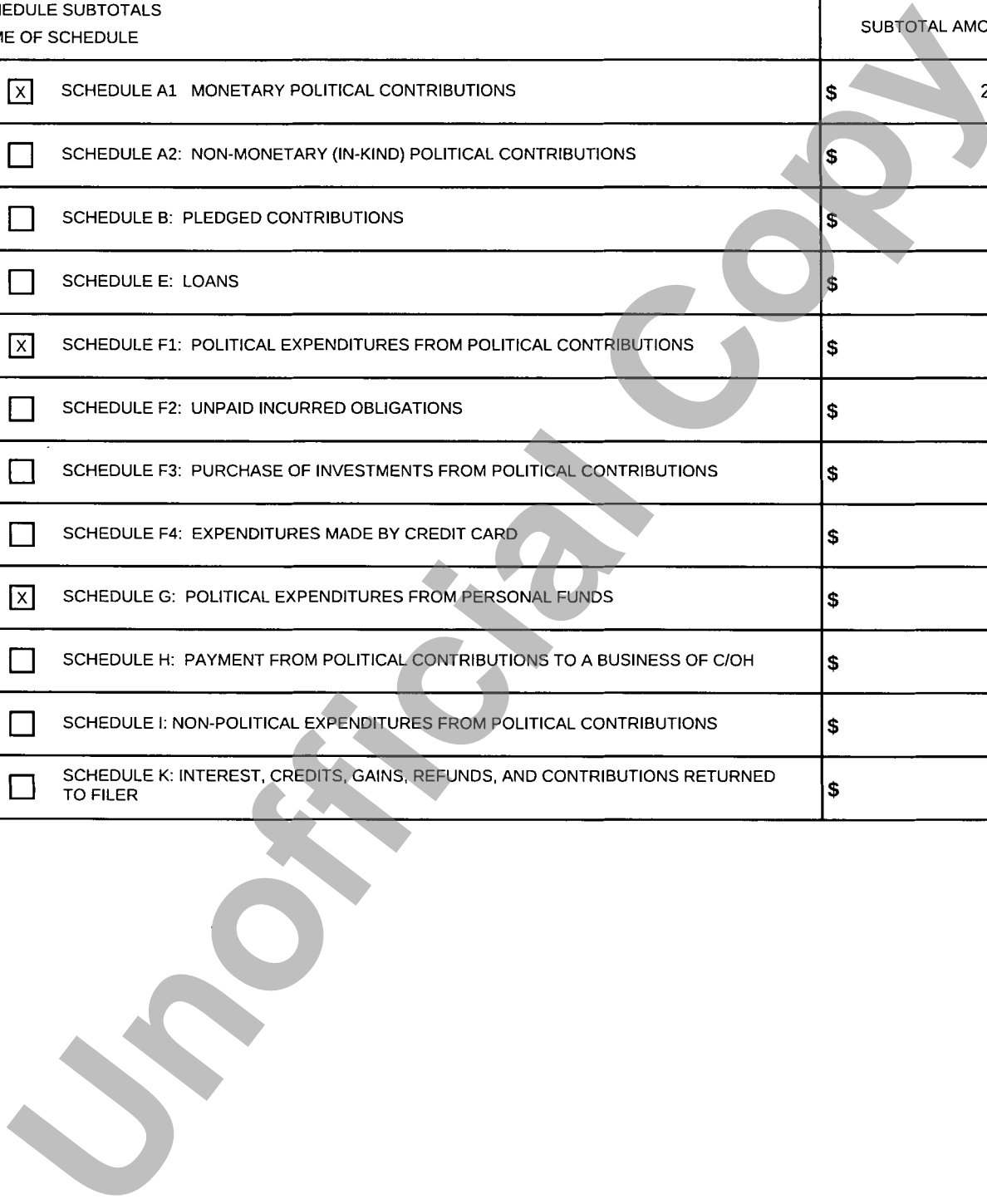
  
 \_\_\_\_\_  
 Signature of officer administering

Nataly Ramirez  
 \_\_\_\_\_  
 Printed name of officer administering

notary  
 \_\_\_\_\_  
 Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Osborne, Matthew		<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,440.00
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	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 224.00
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	\$ 398.36
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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1. Sch: 1/3 Rpt: 4/11
<b>2</b> FILER NAME Osborne, Matthew		<b>3</b> Filer ID
<b>4</b> Date 12/17/2021	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aquino, Neil  <b>6</b> Contributor address, City, State, Zip Code 5353 Memorial Dr  Houston, TX 77007	<b>7</b> Amount of Contribution (\$) \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) NA		<b>9</b> Employer (See Instructions) Retired
Date 12/28/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goldberg, David  Contributor address; City, State; Zip Code 3107 Fairhope St  Houston, TX 77025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Priest		Employer (See Instructions) St Mark's Episcopal
Date 12/31/2021	Full name of contributor <input type="checkbox"/> 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 occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/28/2021	Full name of contributor <input type="checkbox"/> 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 occupation / Job title (See Instructions) Compliance Analyst		Employer (See Instructions) BakerRipley
Date 09/19/2021	Full name of contributor <input type="checkbox"/> 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 occupation / Job title (See Instructions) Deputy City Controller		Employer (See Instructions) City of Houston

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1. Sch: 2/3 Rpt: 5/11
<b>2</b> FILER NAME Osborne, Matthew		<b>3</b> Filer ID
<b>4</b> Date 12/25/2021	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Osborne, Erika	<b>7</b> Amount of Contribution (\$) \$125.00
<b>6</b> Contributor address; City; State; Zip Code 25455 Borough Park Dr 735 Spring, TX 77380		
<b>8</b> Principal occupation / Job title (See Instructions) Manager		<b>9</b> Employer (See Instructions) Cormier's Kitchen
Date 12/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Osborne, Sandra	Amount of Contribution (\$) \$350.00
Contributor address; City; State; Zip Code 24323 Glen Loch Dr  Spring, TX 77380		
Principal occupation / Job title (See Instructions) Customer Service		Employer (See Instructions) HEB
Date 12/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pardo, Amos	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 13414 Babbitt Ct  Houston, TX 77034		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) The Selesky Law Firm
Date 11/03/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Christina	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 1418 Vermont St #6 Houston, TX 77006		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Brown and Gay Engineering
Date 12/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Kathi	Amount of Contribution (\$) \$350.00
Contributor address; City; State; Zip Code 3415 Clear Water Park Dr  Katy, TX 77450		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) n/a

**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 Osborne, Matthew		3 Filer ID
4 Date 12/21/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stansbury, Brian	7 Amount of Contribution (\$) \$50.00
	6 Contributor address, City, State; Zip Code 1719 N Barton St Arlington , VA 22201	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) King & Spalding
Date 12/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) West, Chase	Amount of Contribution (\$) \$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

Unofficial Copy

# POLITICAL EXPENDITURES 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: Sch: 1/4 Rpt: 7/11		2 FILER NAME Osborne, Matthew		3 Filer ID
4 Date 07/29/2021		5 Payee name Nationbuilder		
6 Amount (\$) \$29.00		7 Payee address, City, State; Zip Code 520 S Grand Ave  Los Angeles, CA 90071		
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 Website host	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 08/30/2021		Payee name Nationbuilder		
Amount (\$) \$29.00		Payee address; City, State, Zip Code 520 S Grand Ave  Los Angeles, CA 90071		
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 website	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 09/29/2021		Payee name Nationbuilder		
Amount (\$) \$29.00		Payee address; City, State; Zip Code 520 S Grand Ave  Los Angeles, CA 90071		
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 Website	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held



# POLITICAL EXPENDITURES 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.

<b>1</b> Total pages Schedule F1: Sch: 2/4 Rpt: 8/11	<b>2</b> FILER NAME Osborne, Matthew	<b>3</b> Filer ID
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<b>4</b> Date 10/29/2021	<b>5</b> Payee name Nationbuilder
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<b>6</b> Amount (\$) \$29.00	<b>7</b> Payee address; City; State, Zip Code 520 S Grand Ave  Los Angeles, CA 90071
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/29/2021	Payee name Nationbuilder
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Amount (\$) \$29.00	Payee address; City; State; Zip Code 520 S Grand Ave  Los Angeles, CA 90071
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense website
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2021	Payee name Nationbuilder
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Amount (\$) \$29.00	Payee address, City; State; Zip Code 520 S Grand Ave  Los Angeles, CA 90071
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense website
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES 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: Sch: 3/4 Rpt: 9/11		2 FILER NAME Osborne, Matthew		3 Filer ID	
4 Date 07/30/2021		5 Payee name Wells Fargo Bank			
6 Amount (\$) \$10.00		7 Payee address; City; State; Zip Code 1500 Waugh Dr  Houston , TX 77006			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/31/2021		Payee name Wells Fargo Bank			
Amount (\$) \$10.00		Payee address, City; State; Zip Code 1500 Waugh Dr  Houston , TX 77006			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/30/2021		Payee name Wells Fargo Bank			
Amount (\$) \$10.00		Payee address; City; State; Zip Code 1500 Waugh Dr  Houston , TX 77006			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES 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: Sch: 4/4 Rpt: 10/11	2 FILER NAME Osborne, Matthew	3 Filer ID
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4 Date 10/29/2021	5 Payee name Wells Fargo Bank
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6 Amount (\$) \$10.00	7 Payee address, City, State; Zip Code 1500 Waugh Dr  Houston , TX 77006
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/30/2021	Payee name Wells Fargo Bank
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Amount (\$) \$10.00	Payee address, City; State; Zip Code 1500 Waugh Dr  Houston , TX 77006
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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**POLITICAL EXPENDITURES FROM PERSONAL FUNDS**

**SCHEDULE G**

**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 G: Sch: 1/1 Rpt: 11/11	2 FILER NAME Osborne, Matthew	3 Filer ID
4 Date 11/01/2021	5 Payee name M3 Graphics	
6 Amount (\$) \$398.36 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 11730 Wilcrest Dr  Houston , TX 77099	
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 Campaign Lit
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

