


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:
3 CANDIDATE / OFFICEHOLDER NAME	<input checked="" type="checkbox"/> MS <input type="checkbox"/> MRS / MR FIRST MI <i>Sylvia A. Tragos Oliver</i> NICKNAME LAST SUFFIX	OFFICE USE ONLY	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>2814 Rogers St Corpus Christi, TX 78405</i>	Date Received Date Filed 10/7/24  Rebecca Huerta City Secretary	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>341 877-3634</i>	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	<input checked="" type="checkbox"/> MS <input type="checkbox"/> MRS / MR FIRST MI <i>Eddie Jackson - M.M.H.S.</i> NICKNAME LAST SUFFIX	Receipt #	Amount \$
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>4721 Angela Dr Corpus Christi, TX 78416</i>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>(361) 726-7582</i>		
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 THROUGH Month Day Year <i>01/01/24 THROUGH 09/26/24</i>		
11 ELECTION	ELECTION DATE Month Day Year <i>11/05/24</i>	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) <i>Council Change</i>	
14 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.		
Additional Pages	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	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

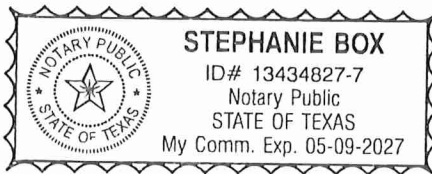
15 C/OH NAME <i>Sylvia A. Tryon Oliver</i>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <i>0</i>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <i>14,273.73</i>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <i>28446</i>
	4. TOTAL POLITICAL EXPENDITURES	\$ <i>9366.00</i>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <i>9580.28</i>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <i>0</i>

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.

Sylvia A. Tryon Oliver
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by *Sylvia Tryon Oliver* this the *7* day of *October*, 20*24*, to certify which, witness my hand and seal of office.

[Signature] *Stephanie Box* *Notary Public*
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Sylvia A. Taylor Oliver</i>	20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 8337.13
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4. SCHEDULE E: LOANS	\$ 0
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 5905.03
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 2157.78
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 2400.87
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 267.40
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

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:
2 FILER NAME <i>Sylvia A Tyson-Driver</i>		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>See attached</i>	7 Amount of contribution (\$)
	6 Contributor address; City; State; Zip Code	
8 Principal occupation / Job title (See Instructions)		9 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)
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)
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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

JULY

7/31 ENDING BAL: \$3020.96

A1

DEPOSITS

CASHAPP	CHK/CSH		
\$ 805.00	\$ 180.00	\$	805.00
	\$ 750.00	\$	1,199.00
	\$ 269.00	TTL INCOME	\$ 2,004.00
\$ 805.00	\$ 1,199.00		

TTL EXPENSES \$ 2,450.45

TTL PERSONAL CARDS \$ 1,307.05

INCOMING CASH
\$ 243.40

2243.40



AI

July 2024

Account Statement

Cash App
1955 Broadway, Suite 600
Oakland, CA 94612

Sylvia Tryon Oliver
2814 Rogers Street
Corpus Christi, TX 78405

Balance on Jul 1

\$0.00

Change this month

\$0.00

Balance on Jul 31

\$0.00



Money In

+ \$805.00

Money Out

- \$805.00

Fees

\$0.00



July 2024

Account Statement

Transactions

Date	Description	Details	Fee	Amount
Jul 1	Deborah	Cash App payment	\$0.00	+ \$100.00
Jul 2	Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$100.00
Jul 10	Eric Cantu	Cash App payment	\$0.00	+ \$60.00
Jul 12	Antione Edwards	Cash App payment	\$0.00	+ \$120.00
Jul 13	Jacquelyn Walker	Cash App payment	\$0.00	+ \$150.00
Jul 15	Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$330.00
Jul 15	Jacquelyn Walker	Cash App payment	\$0.00	+ \$30.00
Jul 16	Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$30.00
Jul 17	Pamela Simms	Cash App payment	\$0.00	+ \$30.00
Jul 17	Lucretia	Cash App payment	\$0.00	+ \$60.00
Jul 17	Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$90.00
Jul 18	Yolanda Arevalo	Cash App payment	\$0.00	+ \$60.00
Jul 18	Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$60.00
Jul 20	Thea Cain	Cash App payment	\$0.00	+ \$30.00



July 2024

By card (1) Cash App (2)

Transactions

Date	Description	Details	Fee	Amount
Jul 20	Gertrude Hubbard	Cash App payment	\$0.00	+ \$40.00
Jul 21	Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$70.00
Jul 22	Sharon Floyd	Cash App payment	\$0.00	+ \$25.00
Jul 22	Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$25.00
Jul 30	Miner Satterwhite Iii	Cash App payment	\$0.00	+ \$100.00
Jul 31	Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$100.00

Aug

A1

AUG

8/31 ENDING BAL: \$4782.08

DEPOSITS

TTL INCOME

CASHAPP	CHK/CSH	\$	597.00
\$ 597.00	\$ 175.00	\$	2,825.00
	\$ 2,400.00	\$	3,422.00
	\$ 250.00		
\$ 597.00	\$ 2,825.00		

TTL EXPENSES \$ 3,118.03

TTL PERSONAL CARDS \$ 930.40



~~BA1~~

(A1)

3422 - Aug

2671.73 - Sp

2243.40 - Jul

8337.13



August 2024

Cash App
1955 Broadway, Suite 600
Oakland, CA 94612

Sylvia Tryon Oliver
2814 Rogers Street
Corpus Christi, TX 78405

Balance on Aug 1

Change this month

Balance on Aug 31

\$0.00

-

\$0.00

=

\$0.00

Money In

+ \$597.00

Money Out

- \$597.00

Fees

\$0.00



August 2024

Account ID: 123456789

Transactions

Date	Description	Details	Fee	Amount
Aug 6	From Arturo Lima - <i>campaign donation</i>	Cash App payment	\$0.00	<u>+ \$20.00</u>
Aug 7	To Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$20.00
Aug 12	From Barbara - <i>Comedy Show</i> <i>Barbara</i>	Cash App payment	\$0.00	<u>+ \$500.00</u>
Aug 12	To Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$500.00
Aug 25	From James - <i>campaign donation</i>	Cash App payment	\$0.00	<u>+ \$52.00</u>
Aug 25	To Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$52.00
Aug 27	From Thea Cain - <i>campaign donation</i>	Cash App payment	\$0.00	<u>+ \$25.00</u>
Aug 28	To Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$25.00

SEP 2024 MONTHLY BILLS CAMPAIGN

SEPT

DEPOSITS

CASHAPP

\$ 1,026.00

41

INCOME/ DONATIONS

IBEW	\$	1,000.00
R TORRES	\$	200.00
P BASS	\$	35.00
M DURAN	\$	100.00
R MCNARRY	\$	20.00
T MITCHELL	\$	20.00
MS PERRYMAN	\$	20.00
T CAIN	\$	10.00
C KOIVULA	\$	50.00
D FILLMORE	\$	100.00
J MARCEE	\$	20.00
M WASHINGTON	\$	20.00
RE-DEPOSIT	\$	50.73
TOTAL	\$	1,645.73

\$ 1,645.73
 \$ 1,026.00

 \$ 2,671.73



September 2024
Account Statement

Cash App
1955 Broadway, Suite 600
Oakland, CA 94612

Sylvia Tryon Oliver
2814 Rogers Street
Corpus Christi, TX 78405

Balance on Sep 1

\$0.00

Change this month

\$0.00

Balance on Sep 30

\$0.00

-

=

Money In

+ \$1,026.00

Money Out

- \$1,026.00

Fees

\$0.00



September 2024

Account Statement

Transactions

Date	Description	Details	Fee	Amount
Sep 2	From Leslie Moore	Cash App payment	\$0.00	+\$500.00
Sep 2	To Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$500.00
Sep 15	From Dinah Taylor	Cash App payment	\$0.00	+\$21.00
Sep 16	To Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$21.00
Sep 20	To Lillie's A Special Boutique from MasterCard Debit 7075 x7075	Cash App payment	\$0.00	\$135.00
Sep 23	From Jacquelyn Walker	Cash App payment	\$0.00	+\$40.00
Sep 23	To Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$40.00
Sep 24	From Ollie Kramer	Cash App payment	\$0.00	+\$40.00
Sep 24	To Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$40.00
Sep 25	From Tai Lynn Rives	Cash App payment	\$0.00	+\$20.00
Sep 25	From Cameron	Cash App payment	\$0.00	+\$20.00
Sep 25	To Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$40.00
Sep 26	From Dr S. A. S. Lott	Cash App payment	\$0.00	+\$40.00



September 2024

Account Information

Transactions

Date	Description	Details	Fee	Amount
Sep 26	From Stephenie Rhodes	Cash App payment	\$0.00	+ \$100.00
Sep 26	To Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$140.00
Sep 27	From Gertrude Hubbard	Cash App payment	\$0.00	+ \$40.00
Sep 27	From Alice Hawkins	Cash App payment	\$0.00	+ \$20.00
Sep 27	From Ladon Williams	Cash App payment	\$0.00	+ \$25.00
Sep 27	To Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$85.00
Sep 28	From Thea Cain	Cash App payment	\$0.00	+ \$160.00
Sep 30	To Randolph - Brooks Federal Credit Union x0072	Standard transfer	\$0.00	\$160.00

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 <i>Sylvia A. Trope Cliven</i>	3 Filer ID (Ethics Commission Filers)
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4 Date	5 Payee name <i>Sylvia A. Trope Cliven</i>
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6 Amount (\$)	7 Payee address; City; State; Zip Code <i>See Attached</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Aug

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: 01	2 FILER NAME: <i>Sylvia A. Tregas Olsen</i>	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 307.00
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5 Date:	6 Payee name
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7 Amount (\$)	8 Payee address;	City;	State;	Zip Code
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date:	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input type="checkbox"/> Non-Political
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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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

TTL July Conting — 8180.

TTL Exp — 5908.
14,088

Cont. Aug — 3422.

Exp 3118.

TTL Conting maintained
w/o last day — 5310.13
11,850.13

14,088

11,850.13

7566.34

33,504.47

Spt

Cont — 2671.75

Maintained 240
~~2000~~ 284.46

TT 240 — 3400

TT Conting maintained — 4270.15
w/o last day 7566.34

5310.13

4270.15

28

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: 1	2 FILER NAME <i>Sylvia A. Traylor-Olivera</i>	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 1068.78
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5 Date 7/19	6 Payee name <i>Prosper Marketplace</i>
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7 Amount (\$) 1068.78	8 Payee address; City; State; Zip Code
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. 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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Sept

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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 F2: <u>1</u>	2 FILER NAME <i>Sylvia A. Tryon Olsen</i>	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ <u>782.00</u>
--	------------------

5 Date:	6 Payee name
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7 Amount (\$)	8 Payee address; City; State; Zip Code
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

11 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
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	---

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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

TTL Exp

Unpd incurred charges

782 - Sept

307 - Aug

1068.78 - June

2157.78

Eq

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME <i>Sylvia A. Tyson-Oliver</i>		3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<i>See Attached</i>		\$
5 CREDIT CARD ISSUER	Name of financial institution		
6 PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)		(b) Description
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office Sought	Office Held
PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)		(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office Sought	Office Held
PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)		(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office Sought	Office Held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G:	2 FILER NAME <i>Sylvia A. Taylor-Oliver</i>	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name <i>See attached</i>	
6 Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(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 (\$) <input type="checkbox"/> Reimbursement from political contributions intended	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 (\$) <input type="checkbox"/> Reimbursement from political contributions intended	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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

July

F1

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

MONTH	AMOUNT	DESCRIPTION-EXPENSES	CR CARD	CASH
3-Jul	\$ 140.46	CUSTOM BUTTONS	SOLICITATION/FUNDRAISING EXPN 7279	
4-Jul	\$ 42.21	Office Depot/PAPER SUPPLIES	OFFICE SUPPLIES 5673	
5-Jul	\$ 1,000.00	CREDIT CARD PAYMENT	CREDIT CARD PAYMENT	
15-Jul	\$ 525.00	RENTAL FEE FOR COMEDY SHOW FUNDERS/YWCA	SOLICITATION/FUNDRAISING EXPN 7279	
16-Jul	\$ 21.54	FOOD/BEVERAGE-TEAM MTG--BILL MILLER	FOOD/BEVERAGE EXPENSE 5673	
19-Jul	\$ 45.07	GASOLINE-TRAVEL TO CAMPAIGN/COMM EVENTS	SOLICITATION/FUNDRAISING EXPN SAM'S CRD	
19-Jul	\$ 38.02	FOOD/COMEDY SHOW FUNDRAISER/SAM'S CLUB 7/20	FOOD/BEVERAGE EXPENSE	CASH
19-Jul	\$ 15.38	FOOD/COMEDY SHOW FUNDRAISER/WALMART 7/20	FOOD/BEVERAGE EXPENSE	CASH
19-Jul	\$ 137.34	EQPT RENTAL;COMEDY SHOW FUNDR/BT RENTS	SOLICITATION/FUNDRAISING EXPN 7279	
20-Jul	\$ 40.00	COBY RUSSELL/DELIVERY SERVICE FEE 7/20	FOOD/BEVERAGE EXPENSE	CASH
22-Jul	\$ 100.00	GENERAL ELECTION APPL FEE	OFFICE OVERHEAD/RENTAL EXPN	CASH
30-Jul	\$ 295.43	Office Depot/PAPER SUPPLIES, TONER	OFFICE SUPPLIES 7279	
30-Jul	\$ 50.00	PHOTOGRAPHER DONATION/FUNDR 9/27	SOLICITATION/FUNDRAISING EXPN	CASH
		G. STEWART		
	\$ 2,450.45			

G

CREDIT CARD

3-Jul	\$ 140.46	CUSTOM BUTTONS	7279
4-Jul	\$ 42.21	Office Depot/PAPER SUPPLIES, TONER	5673
15-Jul	\$ 525.00	RENTAL FEE FOR COMEDY SHOW FUNDERS/YWCA	7279
16-Jul	\$ 21.54	FOOD/BEVERAGE-TEAM MTG-BILL MILLER BBQ	5673
19-Jul	\$ 45.07	GASOLINE-TRAVEL TO CAMPAIGN/COMM EVENTS	SAM'S CRD/7671
19-Jul	\$ 137.34	EQPT RENTAL;COMEDY SHOW FUNDR/BT RENTS	7279
22-Jul	\$ 100.00	GENERAL ELECTION APPL FEE	7279
30-Jul	\$ 295.43	Office Depot/PAPER SUPPLIES, TONER	7279
	\$ 1,307.05		

PERSONAL CARD #S

7279* PROSPER MARKETPLACE/COASTAL COMMUNITY BANK 221 MAIN ST SAN FRANCISCO, CA
 7671** SAMS CLUB 3500 E CLUB BLVD--BENTONVILLE, AZ
 5673*** TX BRIDGE CU//PERSONAL FUNDS HOLLY RD, CC TX

7279	\$	1,198.23
7671		45.07
	\$	<u>1,243.30</u>

PERSONAL FUNDS

F4

5673 63.75

F4

POLITICAL EXPENDITURES

MONTH--AUG	AMOUNT	DESCRIPTION-EXPENSES		CR CARD	CHK
3-Aug	\$ 18.36	FOOD/BEVERAGE/CAMPAIGN EXPN--CAMPAIGN TEAM MTG 8/4		7279*	
		HEB--CORPUS CHRISTI			
3-Aug	\$ 22.08	FOOD/BEVERAGE/CAMPAIGN EXPN-		7279*	
		MCDONALDS PORT AYERS			
7-Aug	\$ 500.00	credit card payment/withdrawal from chknrg acct			
8-Aug	\$ 728.23	DEPOSIT--ARROW SIGNS CO/CAMPAIGN SIGNS-INVOICE #8201			1009
		1343 S TAPLES			
12-Aug	\$ 114.75	FOIL CREATIONS/ POST CARDS PRINTING SVCS--AYERS ST CC TX			1008
		INVOICE #5788;5794--33;56/81.19			
13-Aug	\$ 40.13	GASOLINE-TRAVEL TO CAMPAIGN COMMUNITY EVENTS		SAM'S CRD	
		SAMS CLUB--SPID			
13-Aug	\$ 20.11	FOOD/BEVERAGE/CAMPAIGN EXPN-CAMPAIGN TEAM MTG 8/13		7075***	
		HEB--CORPUS CHRISTI			
13-Aug	\$ 250.00	DEPOSIT-CAMPAIGN SIGNS--ARROW SIGNS CO INVOICE #8201		7279*	
		1343 S TAPLES			
14-Aug	\$ 245.00	DEPOSIT-CAMPAIGN SIGNS--ARROW SIGNS CO-INVOICE #8201			1007
		1343 S TAPLES			
14-Aug	\$ 9.69	FOOD/BEVERAGE--MONTHLY DEMS MTG 9/14		7279*	
		MILLERS BBQ--WOW RD			
14-Aug	\$ 23.44	FOOD/BEVERAGE/CAMPAIGN EXPN--CAMPAIGN TEAM MTG 8/14		9445****	
		MILLERS BBQ WW RD			
14-Aug	\$ 14.70	FOOD/BEVERAGE/CAMPAIGN EXPN-CAMPAIGN TEAM MTG 8/14		7279*	
		SUBWAY			
16-Aug	\$ 173.20	FOIL CREATIONS: POST CARDS PRINTING SVCS-INVOICE #5800			1010
		AYERS ST			
17-Aug	\$ 18.40	FOOD/BEVERAGE/CAMPAIGN EXPN-CAMPAIGN TEAM MTG 8/14		7279*	
		HEB CORPUS CHRISTI			
19-Aug	\$ 30.17	GASOLINE-TRAVEL TO CAMPAIGN/COMM EVENTS		SAM'S CRD	
		SAMS CLUB SPID			
19-Aug	\$ 10.77	FOOD/BEVERAGE/CAMPAIGN EXPN--TEAM MTG 8/19		7075***	
		BILL MILLER BBQ AYERS ST			
20-Aug	\$ 29.08	FOOD/BEVERAGE/CAMPAIGN EXPN--SARKU JAPAN--SPID		7279*	
		CAMPAIGN TEAM GROUP MTG 8/20			
23-Aug	\$ 250.00	DEPOSIT--ARROW SIGNS CO/CAMPAIGN SIGNS/INV#8274--S STAPL			1011
24-Sep	\$ 8.42	FOOD/BEVERAGE/CAMPAIGN EXPN--		7075***	
		CAMPAIGN TEAM MTG 8/20--WHITABURGER BALDWIN ST			
27-Aug	\$ 165.23	/FUNDRAISING EXPN-BWB RESTAURANT HOLLY RD			1012

29-Aug	\$	190.05	HOME DEPOT-POLES/MATERIALS FOR SIGNS--S PORT AVE	SOLICITATION/FUNDRAISING EXPN	7279*	
29-Aug	\$	296.66	PAID-ARROW SIGN'S CO/CAMPAIGN SIGNS-INV#8274/	SOLICITATION/FUNDRAISING EXPN		1014
	\$	3,118.03				
PERSONAL CARD #S			1343 S STAPLES			

7279* PROSPER MARKETPLACE/COASTAL COMMUNITY BANK
7671** SAMS CLUB
7075*** TX BRIDGE CU//PERSONAL FUNDS
9445**** DISCOVER CARD

221 MAIN ST SAN FRANCISCO, CA
 3500 E CLUB BLVD--BENTONVILLE, AZ
 HOLLY RD, CC TX
 PO Box 45909 San Francisco CA

EXP BY CREDIT CARD

DATE	AMOUNT	DESCRIPTION	CARD #	TOTAL
3-Aug	\$ 18.36	FOOD/BEVERAGE/CAMPAIGN EXPN--HEB	7279*	797.36
3-Aug	\$ 22.08	FOOD/BEVERAGE/CAMPAIGN EXPN--MCDONALDS	7279*	70.30
13-Aug	\$ 40.13	GASOLINE-TRAVEL TO CAMPAIGN COMMUNITY EVENTS	SAM'S CRD/7671	23.44
13-Aug	\$ 20.11	FOOD/BEVERAGE/CAMPAIGN EXPN--HEB	7075***	\$ 891.10

DATE	AMOUNT	DESCRIPTION	CARD #	TOTAL
13-Aug	\$ 250.00	DEPOSIT-CAMPAIGN SIGNS--ARROW SIGNS CO	7279*	39.80
14-Aug	\$ 245.00	DEPOSIT-CAMPAIGN SIGNS--ARROW SIGNS CO	7279*	930.40
14-Aug	\$ 9.69	FOOD/BEVERAGE--MONTHLY DEMS MTG 9/14	7279*	
14-Aug	\$ 23.44	FOOD/BEVERAGE/CAMPAIGN EXPN--HEB	9445****	

DATE	AMOUNT	DESCRIPTION	CARD #	TOTAL
14-Aug	\$ 14.70	FOOD/BEVERAGE/CAMPAIGN EXPN--SUBWAY	7279*	2,187.63
17-Aug	\$ 18.40	FOOD/BEVERAGE/CAMPAIGN EXPN--HEB	7279*	
19-Aug	\$ 30.17	GASOLINE-TRAVEL TO CAMPAIGN/COMM EVENTS	SAM'S CRD/7671	
19-Aug	\$ 10.77	FOOD/BEVERAGE/CAMPAIGN EXPN--BILL MILLER	7075***	
20-Aug	\$ 29.08	FOOD/BEVERAGE/CAMPAIGN EXPN--SARKU JAPAN	7279*	
24-Sep	\$ 8.42	FOOD/BEVERAGE/CAMPAIGN EXPN--WHATABURGER	7075***	
29-Aug	\$ 190.05	HOME DEPOT-POLES/MATERIALS FOR SIGNS	7279*	

DATE	AMOUNT	DESCRIPTION	CARD #	TOTAL
29-Aug	\$ 190.05	HOME DEPOT-POLES/MATERIALS FOR SIGNS	7279*	930.40

TTL EXP \$ 3,118.03
TTL CR CRD \$ (930.40)
\$ 2,187.63

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TTL Cont 8180
3422
2671.73

14,273.73

TTL Exp 5908
3118
340

9366

SEPT		POLITICAL EXPENDITURES	
MONTH	AMOUNT	DESCRIPTION-EXPENSES	CHK
24-Sep	\$ 40.00	CB TX DEMOCRAT MEMBERSHIP	1020
25-Sep	\$ 300.00	COBY RUSSELL--BBQ FUNDRAISER 9/27	1019
	\$ 340.00		

F1

PERSONAL FUNDS

7-Sep	\$ 8.12	DOLLAR TREE-1620 S PADRE ISLAND DR	7075
11-Sep	\$ 9.69	MILLERS BBQ-6601 WEBER RD	7075
		FOOD/ BEVERAGE--MONTHLY DEMS MTG 9/11	
18-Sep	\$ 14.00	FOOD/ BEVERAGE CAMPAIGN EXP-TACO RICO	7075
		FUNDRAISER-BBQ 9/27	
24-Sep	\$ 8.42	FOOD/BEVERAGE/CAMPAIGN EXPN--WHATABURGER	7075
	\$ 40.23	FUNDRAISER-BBQ 9/27	

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EXP MADE BY CREDIT CARD

25-Sep	\$ 30.12	GASOLINE/TRAVEL TO ISLAND COMM EVENT	SAM'S
26-Sep	\$ 133.30	FOOD/ BEVERAGE CAMPAIGN EXP-SAMS CLUB	SAM'S
	\$ 163.42		

F4

PERSONAL CARD #S

7671
7075

SAMS CLUB-- 3500 E CLUB BLVD--BENTONVILE, AZ
TX BRIDGE CU//PERSONAL FUNDS HOLLY RD, CC TX