CANDIDATE / OFFICEHOLDER FORM C/OH **CAMPAIGN FINANCE REPORT** COVER SHEET PG 1 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 10 MS / MRS / MR FIRST MI 3 CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** Richard Mr. J. NAME Date Received SUFFIX NICKNAME LAST "Raz" Rasmussen 2/26/2024 4 CANDIDATE / APT / SUITE #: ADDRESS / PO BOX; STATE: ZIP CODE **OFFICEHOLDER** 18018 Overlook Loop Ste 105-116 MAILING San Antonio, TX 78259-1883 **ADDRESS** Change of Address AREA CODE PHONE NUMBER EXTENSION 5 CANDIDATE/ Date Hand-delivered pr Dete Postmarked OFFICEHOLDER delibered (210)802-8636 PHONE Receipt # Amount \$ MS / MRS / MR FIRST MI 6 CAMPAIGN **TREASURER** Kimberly Mrs. Date Processed NAME LAST SUFFIX **NICKNAME** Date Imaged Rasmussen STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: STATE: ZIP CODE CAMPAIGN **TREASURER** San Antonio TX 78261 4111 Fossil Park **ADDRESS** (Residence or Business) AREA CODE PHONE NUMBER EXTENSION 8 CAMPAIGN TREASURER PHONE 701-4267 (210 9 REPORT TYPE 15th day after campaign 30th day before election Runoff January 15 treasurer appointment (Officeholder Only) Exceeded Modified July 15 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Month Day Year Month Day Year COVERED 25 24 12 / 24 2 **THROUGH ELECTION TYPE ELECTION DATE** 11 ELECTION Primary Runoff Other Month Day Year Description Special 24 5 13 OFFICE SOUGHT (if known) 12 OFFICE OFFICE HELD (if any) NEISD School Board Trustee, SMD5 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. 14 NOTICE FROM **POLITICAL** COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

		31.214 - 11. A		
15 C/OH NAME		16 Filer	ID (Ethics Co	mmission Filers)
Richard J. Rasmusser				30. 605,000 (1 cmm)
17 CONTRIBUTION TOTALS	 TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 	N	\$	155.31
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 1	,475.31
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$	0.00
	4. TOTAL POLITICAL EXPENDITURES		\$	435.54
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LA OF REPORTING PERIOD	ST DAY	\$ 1	,405.00
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD	FTHE	\$	0.00
The state of the s	wear, or affirm, under penalty of perjury, that the accompanying report is true	ue and co	prrect and inclu	udes all information
req	uired to be reported by me under Title 15, Election Code.			
	Richard Signature of Co	<u>Lasu</u> andidate	or Officeholds	er .
	Places complete either entien halos	A/-		
	Please complete either option below	w:		6 8 9 5
(1) Affidavit NOTARY STAMP/SEA	CHARITO BATAYOLA ZERNA My Comm. Exp. 09-28-2026			
	before me by Richard J Rasmussen this the	26	day_off	february.
20 24 to certify	which, witness my hand and seal of office.			5
Signature of officer administer			Member Ca	nsolant 1/Wan
Signature of officer administe	ring oath Printed name of officer administering oath OR		Title of office	adılıllıştering oatıl
(2) Unsworn Declarati		W &		
(2) SHOWOM Decidion				
	, and my date of birth i	s		
My address is	(-1-1)	/_ t_ t_ \		7
000 00 00	(street) (city)			
Executed in	County, State of, on the day of(mon	th)	, 20 (year)	Ą
	Signature of Cand	lidate/Offi	iceholder (Dec	larant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILEI Richa	R NAME 20 Filer ID (Ethic	s Commiss	sion Filers)
	EDULE SUBTOTALS E OF SCHEDULE		SUBTOTAL AMOUNT
1. I	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	1,320.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	70.31
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	SCHEDULE E: LOANS		
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	200
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	435.54
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		435.54
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF CA	/ОН \$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

24.525 ASS (85.705)		
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 2
2 FILER NAME Richard J.	Rasmussen	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#: Kimberly J. Rasmussen	
02/17/2024	6 Contributor address; City; State; Zip 4111 Fossil Park San Antonio, TX 78261	100.00
8 Principal occu	pation / Job title (See Instructions) 9 Employer	(See Instructions)
Date	Full name of contributor out-of-state PAC (ID#	Amount of contribution (\$)
02/19/2024	Contributor address; City; State; Zip	500.00
	5305 Amber Court Burke, VA 2	
Principal occup	ation / Job title (See Instructions) Employer	(See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
02/19/2024	Edmund Olszewski	20.00
	Contributor address; City; State; Zip 9211 Broadway Unit 17662 San Antonio, TX 78	20.00 3217
Principal occup	pation / Job title (See Instructions) Employer	(See Instructions)
Date	Full name of contributor out-of-state PAC (iD#:	
02/19/2024	Karissa Krause Contributor address; City; State; Zip	100 00
	270 Douglas Bend Rd Apt 1207 Gallatin, TN 37	100.00
Principal occup	pation / Job title (See Instructions) Employer	(See Instructions)
	ATTACH ADDITIONAL COPIES OF THIS SCHE If contributor is out-of-state PAC, please see instruction guide for	
		Revised 1/1/2024

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the reques	ted information is not applicable, DO NOT include	this page in the I	
The	Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2
² FILER NAME Richard J.	Rasmussen		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)	
02/21/2024	6 Contributor address; City; State 750 North Glebe Rd Apt 325 Arlington, VA	100.00	
8 Principal occu	pation / Job title (See Instructions) 9 Er	nployer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC (ID#: Phillip Huebner		Amount of contribution (\$)
02/25/2024		e; Zip Code	200.00
Principal occup	ation / Job title (See Instructions)	mployer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)
02/25/2024	Randy Hansen Contributor address; City; State 1814 Lindal Point San Antonio, TX	e; Zip Code	100.00
Principal occup	pation / Job title (See Instructions)	mployer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
02/25/2024		e; Zip Code	200.00
Principal occup	<u> </u>	mployer (See Instruct	ions)
	ATTACH ADDITIONAL CODITO OF THE	C CCUEDIU T AC A	EEDED
	ATTACH ADDITIONAL COPIES OF THE	2017/00 (2011 000 000 000 000 000 000 000 000 000	

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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

10000 1000 1					
TI	he Instruction Guide explains how to complete this form	n.	1 Total pages Sched	ule A2:	
Richard	J. Rasmussen		3 Filer ID (Ethics Co	mmission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ 70.31		
5 Date	6 Full name of contributor		8 Amount of Contribution \$	g In-kind contribution description Business Cards	
02/23/2024	7 Contributor address; City; State; 4111 Fossil Park San Antonio, TX 7	Zip Code '8261			
10 Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICI	AL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribi	utor's job title (FOR JU	JDICIAL) (See Instructions)	
14 Contributor's	s employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spou	se (if any) (FOR JUDICIAL)	
16 If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor	Zip Code	Amount of Contribution \$	In-kind contribution description I I I I I I I I I I I I I I I I I I	
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employ	er (FOR NON-JUDICI		
Contributor's	s principal occupation (FOR JUDICIAL)	Contrib	utor's job title (FOR JU	JDICIAL) (See Instructions)	
Contributor's	s employer/law firm (FOR JUDICIAL)	Law firr	n of contributor's spou	ise (if any) (FOR JUDICIAL)	
If contributo	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		*		
135	ATTACH ADDITIONAL COPIES OF 1			a requirements	

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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 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

Travel Out Of District
Other (enter a category not listed above)

The Instruction	n Guide explains how to c	omplete this form.		USE A NEW PAGE FOR E	EACH CREDIT CARD ISSUER	
1 TOTAL PAGES SCHEDULE F4: 2	2 FILER NAME Richard J. Rasmussen				3 FILER ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED E	XPENDITURES CHARGED TO A	CREDIT CARD			\$	
5 CREDIT CARD ISSUER	Name of financial institu American Express/					
6 PAYMENT	(a) Amount Charged \$ 27.60	(b) Date Expendito 02/16/2		(c) Date(s) Credit Card Issu 2/16/24	er Paid	
7 PAYEE	Office Max		(b) Payee ad 17700 U		ty, State, Zip Code San Antonio, TX 78232	
8 PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense			(b) Description Campaign Flyer	rs	
Non-Political	(c) Check if travel ou	itside of Texas. Complet	te Schedule T.	Check if Austi	n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder Richard J. Rasr			fice Sought ISD School Board Trustee, SMD5	Office Held	
PAYMENT	(a) Amount Charged (b) Date Expenditure Charged $\$^{11.03} \qquad 02/19/2024$			(c) Date(s) Credit Card Issu 2/19/24	er Paid	
PAYEE	(a) Payee name Walgreens	3	(b) Payee ac 20800	ddress; Ci US 281 N San An	ity, State, Zip Code Itonio, TX 78258	
PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense			(b) Description Business Cards		
Non-Political	(c) Check if travel or	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder Richard J. Rasr			ffice Sought ISD School Board Trustee, SMD5	Office Held	
PAYMENT	(a) Amount Charged \$ 12.98	(b) Date Expendit 02/20/2		(c) Date(s) Credit Card Issu 2/20/24	uer Paid	
PAYEE	(a) Payee name Walgreens	3	(b) Payee at 20800	ddress; c US 281 N San An	ity, State, Zip Code Itonio, TX 78258	
PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Business Cards			
Non-Political	(c) Check if travel o	utside of Texas. Comple	te Schedule T.	Check if A	ustin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder Richard J. Ra			ffice Sought EISD School Board Trustee, SMD5	Office Held	
	477.0114.77	ITIONIAL OCCUP	-0 OF THE	COUEDINE AS NEE	DED	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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
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

es/Contract Labor Other (enter a category not listed above)

The Instructio	n Guide explains how to co	omplete this form.		USE A NEW PAGE	FOR EACH CREDIT CARD ISSUER	
1 TOTAL PAGES SCHEDULE F4: 2	² FILER NAME Richard J. Rasmussen				3 FILER ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EX	(PENDITURES CHARGED TO A	CREDIT CARD			\$	
5 CREDIT CARD ISSUER	Name of financial institut American Express/I					
6 PAYMENT	(a) Amount Charged \$ 25.96	(b) Date Expenditu 02/23/2		(c) Date(s) Credit Card Issuer Paid 2/23/24		
7 PAYEE	(a) Payee name Hobby Lob	by	(b) Payee ad 23128 U	address; City, State, Zip Code US 281 N San Antonio, TX 78258		
8 PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top of this schedule) Other			(b) Description Office Supp	lies	
Non-Political	(c) Check if travel ou	tside of Texas. Complet	e Schedule T.	Check i	if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office Sought Office He Richard J. Rasmussen NEISD School Board Trustee, SMD5				Office Held SMD5	
PAYMENT	(a) Amount Charged \$346.40	(b) Date Expendito 02/23/20		(c) Date(s) Credit Car 2/23/24	rd Issuer Paid	
PAYEE	(a) Payee name Sundance Print	Centers	(b) Payee ad 14210		City, State, Zip Code r San Antonio, TX 78232	
PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense			(b) Description Campaign Flyers		
Non-Political	(c) Check if travel ou	tside of Texas. Comple	te Schedule T.	Check	c if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder Richard J. Rasr			fice Sought ISD School Board Trustee,	Office Held SMD5	
PAYMENT	(a) Amount Charged \$ 10.59	(b) Date Expendit 02/24/2		(c) Date(s) Credit Card Issuer Paid 2/24/24		
PAYEE	(a) Payee name Jersey Mike's	(a) Payee name Jersey Mike's Subs (b) Payee address; City, 20323 Huebner Rd San Antonio				
PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Lunch Meal While Campaigning			
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office Sought Office Held Richard J. Rasmussen NEISD School Board Trustee, SMD5					

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Total pages Schedule G:	Richard J. Rasmussen	Filer ID (Ethics Commission Filers		
Date	5 Payee name			
02/16/2024	Office Max			
Amount (\$)	7 Payee address;	City;	State;	Zip Code
7.60 Reimbursement from political contributions intended	17700 US 281 N Ste 800	San Antonio	TX	78261
	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Printing Expense Campaign Flyers			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, 7	TX, officeholder living ex	pense
omplete ONLY if direct xpenditure to benefit C/OH	Candidate / Officeholder name Richard J. Rasmussen	Office sought		Office held
applications to content of our				
Date	Payee name			
02/19/2024	Walgreens			
Amount (\$)	Payee address;	City;	State;	Zip Code
1.03 Reirnbursement from political contributions intended	20800 US 281 N	San Antonio	TX	78258
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Business Cards		
EXPERIENCE	Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living ex	pense
	Candidate / Officeholder name	Office sought		Office held
Complete ONLY if direct expenditure to benefit C/0	PH Richard J. Rasmussen	EISD School Board Trustee, SMD5		
Date	Payee name			
02/20/2024	Walgreens			XV-X
Amount (\$)	Payee address;	City;	State;	Zip Code
2.98 Reimbursement from political contributions intended	20800 US 281 N	San Antonio	TX	78258
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Business Cards	S	
	Check if travel outside of Texas. Complete Schedule T.	in, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Richard J. Rasmussen	Office sought		Office held

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

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Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salanes/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Candidate/Officeholder/Politic Credit Card Payment	al Committee Legal Services Salaries The Instruction Guide explains how to		her (enter a category	not listed above)	
1 Total pages Schedule G:	² FILER NAME Richard J. Rasmussen	3	Filer ID (Ethics	Commission Filers)	
4 Date	5 Payee name			875 65 10	
02/23/2024	Hobby Lobby				
6 Amount (\$) 25.96 Reimbursement from political contributions intended	7 Payee address; 23128 US 281 N	City: San Antonio	State; TX	Zip Code 78258	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description Office Supplies			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living ex	pense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder πame Richard J. Rasmussen	Office sought		Office held	
Date 02/23/2024	Payee name Sundance Print Centers				
Amount (\$) Reimbursement from political contributions intended	Payee address; 14210 Northbrook Dr	City: San Antonio	State; TX	Zip Code 78232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Campaign Flyers	12 Tops 913 - 21612	44001 34	
	Check if trevel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name PH Richard J. Rasmussen	Office sought EISD School Board Trustee, SMD5		Office held	
Date 02/24/2024	Payee name Jersey Mike's Subs				
Amount (\$) 10.59 Reimbursement from political contributions intended	Payee address; 20323 Huebner Rd.	City; San Antonio	State; TX	Zip Code 78258	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Lunch Meal While	e Campaigi	ning	
8	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living e	xpense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Richard J. Rasmussen	Office sought EISD School Board Trustee, SMD5		Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED			

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