

# 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: 9
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Veronica	MI 
	NICKNAME	LAST Law	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; [REDACTED] Fort Worth, TX 76116-7201		ZIP CODE
	Date Received JUL 16 2025		
	TARRANT COUNTY COLLEGE DISTRICT		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
	Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Tom	MI 
	NICKNAME	LAST Law	SUFFIX Jr.
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE [REDACTED] Fort Worth, TX 76116-7201		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	[REDACTED]		
8 REPORT TYPE	<input 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 checked="" 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 04/24/2025	THROUGH	Month   Day   Year 06/30/2025
10 ELECTION	ELECTION DATE Month   Day   Year	ELECTION TYPE	
		<input 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) Tarrant County College Board of Trustees District 7		12 OFFICE SOUGHT (if known) None

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

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

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**13 C / OH NAME** Law, Veronica

**14 Filer ID**

**15 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)**

☐ Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

**COMMITTEE TYPE**

☐ GENERAL

☐ SPECIFIC

**COMMITTEE NAME**

**COMMITTEE ADDRESS**

**COMMITTEE CAMPAIGN TREASURER NAME**

**COMMITTEE CAMPAIGN TREASURER ADDRESS**

**16 CONTRIBUTION  
TOTALS**

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) \$ 13,719.29

**EXPENDITURE  
TOTALS**

3. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 23,844.52

**CONTRIBUTION  
BALANCE**

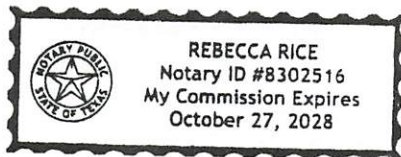
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 1,000.00

**OUTSTANDING  
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 1,467.71

**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.



Veronica Chavez Law  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said VERONICA C. LAW, this the 15th day of July, 2025, to certify which, witness my hand and seal of office.

Rebecca A. Rice  
Signature of officer administering

REBECCA A. RICE  
Printed name of officer administering

NOTARY  
Title of officer administering oath



**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

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<b>18 FILER NAME</b> Law, Veronica		<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	\$ 13,719.29
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	\$ 23,844.52
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 type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
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: 1/4 Rpt: 4/9
<b>2</b> FILER NAME Law, Veronica		<b>3</b> Filer ID
<b>4</b> Date 04/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Kenneth (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code 3101 Avendale Ave  Fort Worth, TX 76109-1002	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coalition for the Fort PAC <hr/> Contributor address; City; State; Zip Code P.O. Box 101652  Fort Worth, TX 76185	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Jeff (Mr.) <hr/> Contributor address; City; State; Zip Code 2325 Mistletoe Drive  Fort Worth, TX 76110	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Republic Title
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donald, Klick (Mr.) <hr/> Contributor address; City; State; Zip Code P.O. Box 7592  Fort Worth, TX 76111	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donselaar, Clarence (Mr.) <hr/> Contributor address; City; State; Zip Code 4205 Ridglea Country Club Dr  Fort Worth, TX 76126-2210	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/4 Rpt: 5/9
<b>2</b> FILER NAME Law, Veronica		<b>3</b> Filer ID
<b>4</b> Date 04/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emmons, James (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code 202 Rim Rock Ln  Aledo, TX 76008	<b>7</b> Amount of Contribution (\$)  <div style="text-align: right;"><b>\$250.00</b></div>
<b>8</b> Principal occupation / Job title (See Instructions) CFO		<b>9</b> Employer (See Instructions) self-employed
Date 04/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Espinoza, Jason (Mr.) <hr/> Contributor address; City; State; Zip Code 7700 Driftwood Ct  North Richland Hills, TX 76182	Amount of Contribution (\$)  <div style="text-align: right;"><b>\$100.00</b></div>
Principal occupation / Job title (See Instructions) Business Banker		Employer (See Instructions) Frost Bank
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Corrie (Ms.) <hr/> Contributor address; City; State; Zip Code 7625 Switchwood Ln  Fort Worth, TX 76123	Amount of Contribution (\$)  <div style="text-align: right;"><b>\$250.00</b></div>
Principal occupation / Job title (See Instructions) Chief Development Officer		Employer (See Instructions) Center for Transforming Lives
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimball, Mak (Mr.) <hr/> Contributor address; City; State; Zip Code 8224 Woodvale Rd  Fort Worth, TX 76135	Amount of Contribution (\$)  <div style="text-align: right;"><b>\$200.00</b></div>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Jr., Tom (Mr.) <hr/> Contributor address; City; State; Zip Code <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> Fort Worth, TX 76116-7201	Amount of Contribution (\$)  <div style="text-align: right;"><b>\$139.29</b></div>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/4 Rpt: 6/9
<b>2</b> FILER NAME Law, Veronica		<b>3</b> Filer ID
<b>4</b> Date 04/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macchia, David (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code 6320 Southwest Blvd  Benbrook, TX 76109	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Self - Wholesale Insurance Agent		<b>9</b> Employer (See Instructions) Macchia General Agency, Inc.
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahon, Brad (Mr.) <hr/> Contributor address; City; State; Zip Code 1716 Inspiration Ln  River Oaks, TX 76114	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Murphy Mahon Keffler Farrier, LLP
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman, Doris (Ms.) <hr/> Contributor address; City; State; Zip Code 6001 Forest Highlands Dr  Fort Worth, TX 76132-4444	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parmelee, Robert (Mr.) <hr/> Contributor address; City; State; Zip Code 3701 Autumn Dr  Fort Worth, TX 76109-2613	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlansker, Jane (Ms.) <hr/> Contributor address; City; State; Zip Code 1614 Sunset Ter  Fort Worth, TX 76102	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Property Management		Employer (See Instructions) Self-employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/4 Rpt: 7/9
<b>2</b> FILER NAME Law, Veronica		<b>3</b> Filer ID
<b>4</b> Date 04/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William, Kerr (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code 3200 Elkhart Ct  Arlington, TX 76016	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)



# 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: 1/2 Rpt: 8/9	<b>2</b> FILER NAME Law, Veronica	<b>3</b> Filer ID
<b>4</b> Date 04/29/2025	<b>5</b> Payee name Catalyst Advisors Group, LLC	
<b>6</b> Amount (\$) \$811.88	<b>7</b> Payee address; City; State; Zip Code 1108 Lavaca St 110-506  Austin, TX 78701	
<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 Signage
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/06/2025	Candidate/Officeholder name Office sought Office held	
Payee name Catalyst Advisors Group, LLC		
Amount (\$) \$2,000.35	Payee address; City; State; Zip Code 1108 Lavaca St 110-506  Austin, TX 78701	
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 Digital Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/16/2025	Candidate/Officeholder name Office sought Office held	
Payee name Catalyst Advisors Group, LLC		
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 1108 Lavaca St 110-506  Austin, TX 78701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting 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 Consulting
Complete <u>ONLY</u> 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: 2/2 Rpt: 9/9	2 FILER NAME Law, Veronica	3 Filer ID
4 Date 06/30/2025	5 Payee name Law Jr., Tom (Mr.)	
6 Amount (\$) \$18,532.29	7 Payee address; City; State; Zip Code <div></div> Fort Worth, TX 76116-7201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense To repay part of loan.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held