

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

|   |   |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
|---|---|---|--|-------------------------------------|---|---------------------------------|---|---|---|--|--|--------|--|-------|---|--|------|
| <b>The C/OH Instruction Guide explains how to complete this form.</b>   |   | <b>1 Filer ID</b> (Ethics Commission Filers)  | <b>2 Total pages filed:</b><br><br><div style="text-align: center; font-size: 1.2em;">40</div> |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| <b>3 CANDIDATE / OFFICEHOLDER NAME</b>  | <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">MS / MRS / MR</td> <td style="width:33%; border: none;">FIRST</td> <td style="width:33%; border: none;">MI</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none; text-align: center;">Ann</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">NICKNAME</td> <td style="border: none;">LAST</td> <td style="border: none;">SUFFIX</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none; text-align: center;">Kitchen</td> <td style="border: none;"></td> </tr> </table>                           |   | MS / MRS / MR  | FIRST                               | MI  |                                 | Ann   |   | NICKNAME  | LAST   | SUFFIX   |        | Kitchen  |       | <div style="text-align: center; border: 1px solid black; padding: 5px;"> <b>OFFICE USE ONLY</b> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Date Received<br/><br/> <div style="text-align: center; font-weight: bold; font-size: 1.1em;">OCC RECEIVED AT<br/>JUL 16 '18 PM4:09</div> </div> |  |      |
|   | MS / MRS / MR   | FIRST   | MI   |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
|   | Ann   |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| NICKNAME  | LAST  | SUFFIX  |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
|   | Kitchen   |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">ADDRESS / PO BOX;</td> <td style="width:15%; border: none;">APT / SUITE #;</td> <td style="width:15%; border: none;">CITY;</td> <td style="width:15%; border: none;">STATE;</td> <td style="width:22%; border: none;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="border: none; text-align: center;">2401 Briargrove, Austin, Texas 78704</td> </tr> </table> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> Change of Address             </div>   |   | ADDRESS / PO BOX;                             | APT / SUITE #;   | CITY;                               | STATE;  | ZIP CODE                        | 2401 Briargrove, Austin, Texas 78704  |   |   |  |  |        |  |       |   |  |      |
| ADDRESS / PO BOX;   | APT / SUITE #;  | CITY;   | STATE;   | ZIP CODE                            |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| 2401 Briargrove, Austin, Texas 78704  |   |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| <b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>   | <table style="width:100%; border: none;"> <tr> <td style="width:20%; border: none;">AREA CODE</td> <td style="width:40%; border: none;">PHONE NUMBER</td> <td style="width:40%; border: none;">EXTENSION</td> </tr> <tr> <td style="border: none;">( 512 )</td> <td style="border: none;">512-228-1645</td> <td style="border: none;"></td> </tr> </table>  |   |  | AREA CODE                           | PHONE NUMBER                                      | EXTENSION                       | ( 512 )   | 512-228-1645                                |   | <div style="border: 1px solid black; padding: 2px;"> Date Hand-delivered or Date Postmarked             </div> |  |        |  |       |   |  |      |
| AREA CODE   | PHONE NUMBER  | EXTENSION                                     |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| ( 512 )   | 512-228-1645  |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| <b>5 CANDIDATE / OFFICEHOLDER PHONE</b>   | <table style="width:100%; border: none;"> <tr> <td style="width:20%; border: none;">MS / MRS / MR</td> <td style="width:33%; border: none;">FIRST</td> <td style="width:33%; border: none;">MI</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none; text-align: center;">Ms. Mary Ann</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">NICKNAME</td> <td style="border: none;">LAST</td> <td style="border: none;">SUFFIX</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none; text-align: center;">Neely</td> <td style="border: none;"></td> </tr> </table>                    |   |  | MS / MRS / MR                       | FIRST   | MI                              |   | Ms. Mary Ann                                |   | NICKNAME   | LAST   | SUFFIX |  | Neely |   | <div style="border: 1px solid black; padding: 2px;"> Receipt #             </div> <div style="border: 1px solid black; padding: 2px; margin-top: 2px;"> Amount \$             </div> |      |
|   | MS / MRS / MR   | FIRST   | MI   |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
|   |   | Ms. Mary Ann                                  |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| NICKNAME  | LAST  | SUFFIX  |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
|   | Neely   |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:15%; border: none;">APT / SUITE #;</td> <td style="width:15%; border: none;">CITY;</td> <td style="width:15%; border: none;">STATE;</td> <td style="width:22%; border: none;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="border: none; text-align: center;">1908 Barton Parkway, Austin, Texas 78704</td> </tr> </table> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> (Residence or Business)             </div> |   |   | STREET ADDRESS (NO PO BOX PLEASE);   | APT / SUITE #;                      | CITY;   | STATE;                          | ZIP CODE  | 1908 Barton Parkway, Austin, Texas 78704    |   |  |  |        | <div style="border: 1px solid black; padding: 2px;"> Date Processed             </div> |       |   |  |      |
| STREET ADDRESS (NO PO BOX PLEASE);  | APT / SUITE #;  | CITY;   | STATE;   | ZIP CODE                            |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| 1908 Barton Parkway, Austin, Texas 78704  |   |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| <table style="width:100%; border: none;"> <tr> <td style="width:20%; border: none;">AREA CODE</td> <td style="width:40%; border: none;">PHONE NUMBER</td> <td style="width:40%; border: none;">EXTENSION</td> </tr> <tr> <td style="border: none;">( 512 )</td> <td style="border: none;">512-442-3414</td> <td style="border: none;"></td> </tr> </table>  |   |   | AREA CODE  | PHONE NUMBER                        | EXTENSION   | ( 512 )                         | 512-442-3414  |   | <div style="border: 1px solid black; padding: 2px;"> Date Imaged             </div> |  |  |        |  |       |   |  |      |
| AREA CODE   | PHONE NUMBER  | EXTENSION                                     |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| ( 512 )   | 512-442-3414  |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| <b>6 CAMPAIGN TREASURER NAME</b>  | <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:15%; border: none;">APT / SUITE #;</td> <td style="width:15%; border: none;">CITY;</td> <td style="width:15%; border: none;">STATE;</td> <td style="width:22%; border: none;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="border: none; text-align: center;">1908 Barton Parkway, Austin, Texas 78704</td> </tr> </table>  |   |  | STREET ADDRESS (NO PO BOX PLEASE);  | APT / SUITE #;                                    | CITY;                           | STATE;  | ZIP CODE                                    | 1908 Barton Parkway, Austin, Texas 78704  |  |  |        |  |       |   |  |      |
| STREET ADDRESS (NO PO BOX PLEASE);  | APT / SUITE #;  | CITY;   | STATE;   | ZIP CODE                            |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| 1908 Barton Parkway, Austin, Texas 78704  |   |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| <b>7 CAMPAIGN TREASURER ADDRESS</b><br>(Residence or Business)  | <table style="width:100%; border: none;"> <tr> <td style="width:20%; border: none;">AREA CODE</td> <td style="width:40%; border: none;">PHONE NUMBER</td> <td style="width:40%; border: none;">EXTENSION</td> </tr> <tr> <td style="border: none;">( 512 )</td> <td style="border: none;">512-442-3414</td> <td style="border: none;"></td> </tr> </table>  |   |  | AREA CODE                           | PHONE NUMBER                                      | EXTENSION                       | ( 512 )   | 512-442-3414                                |   |  |  |        |  |       |   |  |      |
| AREA CODE   | PHONE NUMBER  | EXTENSION                                     |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| ( 512 )   | 512-442-3414  |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| <b>8 CAMPAIGN TREASURER PHONE</b>   | <table style="width:100%; border: none;"> <tr> <td style="width:20%; border: none;">AREA CODE</td> <td style="width:40%; border: none;">PHONE NUMBER</td> <td style="width:40%; border: none;">EXTENSION</td> </tr> <tr> <td style="border: none;">( 512 )</td> <td style="border: none;">512-442-3414</td> <td style="border: none;"></td> </tr> </table>  |   |  | AREA CODE                           | PHONE NUMBER                                      | EXTENSION                       | ( 512 )   | 512-442-3414                                |   |  |  |        |  |       |   |  |      |
| AREA CODE   | PHONE NUMBER  | EXTENSION                                     |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| ( 512 )   | 512-442-3414  |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| <b>9 REPORT TYPE</b>  | <table style="width:100%; border: none;"> <tr> <td style="width:25%;"><input type="checkbox"/> January 15</td> <td style="width:25%;"><input type="checkbox"/> 30th day before election</td> <td style="width:25%;"><input type="checkbox"/> Runoff</td> <td style="width:25%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table> |   |  | <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 \$500 limit  | <input type="checkbox"/> Final Report (Attach C/OH - FR) |        |  |       |   |  |      |
| <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 \$500 limit | <input type="checkbox"/> Final Report (Attach C/OH - FR)                                       |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| <b>10 PERIOD COVERED</b>  | <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Month</td> <td style="width:10%;">Day</td> <td style="width:15%;">Year</td> <td style="width:10%; text-align: center;">THROUGH</td> <td style="width:25%;">Month</td> <td style="width:10%;">Day</td> <td style="width:15%;">Year</td> </tr> <tr> <td style="text-align: center;">01</td> <td style="text-align: center;">01</td> <td style="text-align: center;">2018</td> <td></td> <td style="text-align: center;">06</td> <td style="text-align: center;">30</td> <td style="text-align: center;">2018</td> </tr> </table>  |   |  | Month                               | Day   | Year                            | THROUGH   | Month                                       | Day   | Year   | 01   | 01     | 2018   |       | 06  | 30   | 2018 |
| Month   | Day   | Year  | THROUGH  | Month                               | Day   | Year                            |   |   |   |  |  |        |  |       |   |  |      |
| 01  | 01  | 2018  |  | 06                                  | 30  | 2018                            |   |   |   |  |  |        |  |       |   |  |      |
| <b>11 ELECTION</b>  | <table style="width:100%; border: none;"> <tr> <td style="width:40%;">ELECTION DATE</td> <td style="width:60%;">ELECTION TYPE</td> </tr> <tr> <td>Month      Day      Year</td> <td> <input type="checkbox"/> Primary      <input type="checkbox"/> Runoff      <input type="checkbox"/> Other Description             </td> </tr> <tr> <td style="text-align: center;">11 / 06 / 2018</td> <td> <input checked="" type="checkbox"/> General      <input type="checkbox"/> Special             </td> </tr> </table>   |   |  | ELECTION DATE                       | ELECTION TYPE                                     | Month      Day      Year        | <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description | 11 / 06 / 2018                              | <input checked="" type="checkbox"/> General <input type="checkbox"/> Special        |  |  |        |  |       |   |  |      |
| ELECTION DATE   | ELECTION TYPE   |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| Month      Day      Year  | <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description   |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| 11 / 06 / 2018  | <input checked="" type="checkbox"/> General <input type="checkbox"/> Special  |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| <b>12 OFFICE</b>  | <table style="width:100%; border: none;"> <tr> <td style="width:50%;">OFFICE HELD (if any)</td> <td style="width:50%;">OFFICE SOUGHT (if known)</td> </tr> <tr> <td style="text-align: center; padding: 10px;">Austin City Council District 5</td> <td style="text-align: center; padding: 10px;">Austin City Council District 5</td> </tr> </table>  |   |  | OFFICE HELD (if any)                | OFFICE SOUGHT (if known)                          | Austin City Council District 5  | Austin City Council District 5  |   |   |  |  |        |  |       |   |  |      |
| OFFICE HELD (if any)  | OFFICE SOUGHT (if known)  |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |
| Austin City Council District 5  | Austin City Council District 5  |   |  |                                     |   |                                 |   |   |   |  |  |        |  |       |   |  |      |

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

**14 C/OH NAME** Ann Kitchen **15 Filer ID (Ethics Commission Filers)**

**16 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.

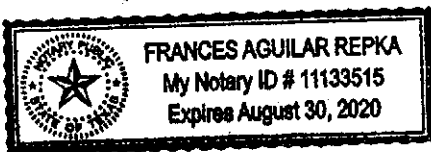
|   |                |                                      |
|---|----------------|--------------------------------------|
| <input type="checkbox"/> GENERAL<br><br><input type="checkbox"/> SPECIFIC | COMMITTEE TYPE | COMMITTEE NAME                       |
|   |                | COMMITTEE ADDRESS                    |
|   |                | COMMITTEE CAMPAIGN TREASURER NAME    |
|   |                | COMMITTEE CAMPAIGN TREASURER ADDRESS |

☐ Additional Pages

|                                |   |              |
|--------------------------------|---|--------------|
| <b>17 CONTRIBUTION TOTALS</b>  | 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ 130.00    |
|                                | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                  | \$ 31,995.00 |
| <b>EXPENDITURE TOTALS</b>      | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED   | \$ 0         |
|                                | 4. TOTAL POLITICAL EXPENDITURES   | \$ 6,544.61  |
| <b>CONTRIBUTION BALANCE</b>    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD                                    | \$ 31,995.00 |
| <b>OUTSTANDING LOAN TOTALS</b> | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                         | \$ 49,944.61 |

**18 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.



AFFIX NOTARY STAMP / SEAL ABOVE

Ann Kitchen  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Ann Kitchen, this the 5TH day of July, 20 18, to certify which, witness my hand and seal of office.

[Signature] Frances Aguilar Repka Notary  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

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

|  |   |   |
|--|---|---|
| <b>19 FILER NAME</b><br>Ann Kitchen              |   | <b>20 Filer ID (Ethics Commission Filers)</b> |
| <b>21 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE |   | <b>SUBTOTAL<br/>AMOUNT</b>                    |
| 1.   | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                           | \$ 31,995.00                                  |
| 2.   | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        | \$  |
| 3.   | <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS                                       | \$4,220.00                                    |
| 4.   | <input checked="" type="checkbox"/> SCHEDULE E: LOANS   | \$ 195.36                                     |
| 5.   | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS   | \$ 78.38                                      |
| 6.   | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$  |
| 7.   | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS             | \$  |
| 8.   | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                      | \$  |
| 9.   | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS             | \$ 6,466.23                                   |
| 10.  | <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH        | \$  |
| 11.  | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS           | \$  |
| 12.  | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$  |

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**40****2** FILER NAME

Ann Kitchen

**3** Filer ID (Ethics Commission Filers)**4** Date

3/28/18

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jim Adams

**6** Contributor address;

City; State; Zip Code

4000 Pinkney St, Austin, Texas 78723

**7** Amount of contribution (\$)

\$350

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

3/26/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Robert Akers

Contributor address;

City; State; Zip Code

2311 Ridgeview, Austin, Texas 78704

Amount of contribution (\$)

\$25

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/28/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

David Anderson

Contributor address;

City; State; Zip Code

2324 Westrock, Austin, Texas 78704

Amount of contribution (\$)

\$200

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/28/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

David Anderson

Contributor address;

City; State; Zip Code

1515 Oxford Ave, Austin, Texas 78704

Amount of contribution (\$)

\$25

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME

Ann Kitchen

**3** Filer ID (Ethics Commission Filers)**4** Date

5/24/18

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Greg Anderson

**6** Contributor address;

City; State; Zip Code

2235 East 6th, #301, Austin, Texas 78702

**7** Amount of contribution (\$)

\$100

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

6/1/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Sarah Andre

Contributor address;

City; State; Zip Code

2318 Canterbury Street, Austin, Texas 78702

Amount of contribution (\$)

\$350

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/18/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bobbie Barker

Contributor address;

City; State; Zip Code

300 Bowie St, #4004, Austin, Texas 78703

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/28/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Charles and Carol Barnett

Contributor address;

City; State; Zip Code

3999 Westlake Drive, Austin, TX 78746

Amount of contribution (\$)

\$700

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

40

2 FILER NAME

Ann Kitchen

3 Filer ID (Ethics Commission Filers)

4 Date

3/28/18

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Gonzalo Barrientos

6 Contributor address;

City; State; Zip Code

2906 Gem Circle, Austin, Texas 78704

7 Amount of contribution (\$)

\$50

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

6/24/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jonathan Beall

Contributor address;

City; State; Zip Code

2503 Flora Cove, Austin, Texas 78746

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/29/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Charles Betts

Contributor address;

City; State; Zip Code

14741 Arrowhead Drive, Volente, TX 78641

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/29/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

John Bishop

Contributor address;

City; State; Zip Code

1240 Barton Hills, Austin, Texas 78704

Amount of contribution (\$)

\$100

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME

Ann Kitchen

**3** Filer ID (Ethics Commission Filers)**4** Date

3/29/18

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

John Bishop

**6** Contributor address;

City; State; Zip Code

1240 Barton Hills Dr, Austin, Texas 78704

**7** Amount of contribution (\$)

\$50

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

6/30/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Sinclair Black

Contributor address;

City; State; Zip Code

208 West 4th Street, Suite 3A, Austin, Texas 78701

Amount of contribution (\$)

\$350

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/30/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

John Blinn

Contributor address;

City; State; Zip Code

5512 Oakwood Cove STE 181, Austin, TX 78731

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/28/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Michael Blizzard

Contributor address;

City; State; Zip Code

2100 Southern Oaks, Austin, Texas 78745

Amount of contribution (\$)

\$50

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**6/29/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Michael Blizzard****6** Contributor address;

City; State; Zip Code

**2100 Southern Oaks, Austin, Texas 78745****7** Amount of contribution (\$)**\$50****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**6/29/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Valinda Bolton**

Contributor address;

City; State; Zip Code

**5000 Woodcreek Rd, Austin, TX 78749**

Amount of contribution (\$)

**\$50**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**David Braun and Peggy Davis**

Contributor address;

City; State; Zip Code

**P.O. Box 1148, Dripping Springs, TX 78620**

Amount of contribution (\$)

**\$700**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/29/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Janee Briesemeister**

Contributor address;

City; State; Zip Code

**2324 Westrock Dr, Austin, Texas 78704**

Amount of contribution (\$)

**\$50**

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.



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**3/28/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Joseph Bruch****6** Contributor address;

City; State; Zip Code

**204 La Vista, Austin, Texas 78704****7** Amount of contribution (\$)**\$25****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**3/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Bill Bunch**

Contributor address;

City; State; Zip Code

**1307 Oxford Ave, Austin, TX 78704**

Amount of contribution (\$)

**\$75**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/29/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Terrell Burnett**

Contributor address;

City; State; Zip Code

**1600 Barton Springs Rd, #3401, Austin, TX 78704**

Amount of contribution (\$)

**\$100**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/14/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Daniel Byrne**

Contributor address;

City; State; Zip Code

**221 West 6th St, Suite 960, Austin, TX 78701**

Amount of contribution (\$)

**\$250**

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

40

2 FILER NAME

Ann Kitchen

3 Filer ID (Ethics Commission Filers)

4 Date

6/29/18

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jeff Friedman

6 Contributor address;

City; State; Zip Code

3500 Jefferson St, Austin, TX 78731

7 Amount of contribution (\$)

\$180

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

6/29/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

M. Dorsey Cartwright

Contributor address;

City; State; Zip Code

1715 Norris Dr, Austin, Texas 78704

Amount of contribution (\$)

\$350

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/30/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Greg Casar

Contributor address;

City; State; Zip Code

300 West Skyview Rd, Austin, TX 78752

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/17/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

James and Mary Clifford

Contributor address;

City; State; Zip Code

16 Laurel Cove, Greensboro, NC 27455

Amount of contribution (\$)

\$700

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME

Ann Kitchen

**3** Filer ID (Ethics Commission Filers)**4** Date

6/28/18

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Charles and Joyce Cloutman

**6** Contributor address;

City; State; Zip Code

15005 Nightingale, Austin, TX 78734

**7** Amount of contribution (\$)

\$100

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

3/28/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Vince Cobalis

Contributor address;

City; State; Zip Code

2025 Independence Drive, Austin, TX 78745

Amount of contribution (\$)

\$25

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/29/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Wade Cooper

Contributor address;

City; State; Zip Code

5006 Gregory Place, Westlake Hills, TX 78746

Amount of contribution (\$)

\$200

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/18/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

James Cousar

Contributor address;

City; State; Zip Code

1110 W. 7th St, Austin, TX 78703

Amount of contribution (\$)

\$125

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

**40**

2 FILER NAME

**Ann Kitchen**

3 Filer ID (Ethics Commission Filers)

4 Date

**3/28/18**

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Art and Karen Danart**

6 Contributor address;

City; State; Zip Code

**10609 River Plantation Dr, Austin, TX 78747**

7 Amount of contribution (\$)

**\$50**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**6/30/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Debra Danburg and Randall Chapman**

Contributor address;

City; State; Zip Code

**3000 Cedarview Dr, Austin, TX 78704**

Amount of contribution (\$)

**\$50**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/19/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Wilbert Deshotel**

Contributor address;

City; State; Zip Code

**1206 Maple #A, Austin, TX 78702**

Amount of contribution (\$)

**\$25**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**4/24/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Christopher Elliott**

Contributor address;

City; State; Zip Code

**2401 Forest Bend Drive, Austin, TX 78704**

Amount of contribution (\$)

**\$350**

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**4/3/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Kimberly Erlinger****6** Contributor address;

City; State; Zip Code

**2505 Spring Creek Dr, Austin, TX 78704****7** Amount of contribution (\$)**\$250****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**6/29/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Gay Erwin**

Contributor address;

City; State; Zip Code

**3 Jeffrey Cove, Austin, TX 78746**

Amount of contribution (\$)

**\$50**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Lynn Langley and Dr. Jim Eskew**

Contributor address;

City; State; Zip Code

**2410 Kathy Cove, Austin, TX 78704**

Amount of contribution (\$)

**\$700**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/25/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**David Evans**

Contributor address;

City; State; Zip Code

**404 Westwood Terrace, Austin, TX 78746**

Amount of contribution (\$)

**\$100**

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME

Ann Kitchen

**3** Filer ID (Ethics Commission Filers)**4** Date

4/15/18

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Shudde Fath

**6** Contributor address;

City; State; Zip Code

1005 Bluebonnet Lane, Austin, TX 78704

**7** Amount of contribution (\$)

\$350

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

5/29/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Cary Ferchill

Contributor address;

City; State; Zip Code

2524 Tanglewood Trail, Austin, TX 78703

Amount of contribution (\$)

\$350

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/29/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Maria Luisa Flores

Contributor address;

City; State; Zip Code

1300 Alta Vista Ave, Austin, TX 78704

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/16/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kevin Foster

Contributor address;

City; State; Zip Code

12100 Metric Blvd #1218, Austin, TX 78758

Amount of contribution (\$)

\$50

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

**40**

2 FILER NAME

**Ann Kitchen**

3 Filer ID (Ethics Commission Filers)

4 Date

**3/28/18**

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Virginia Foster**

6 Contributor address; City; State; Zip Code

**1902 Forestglade, Austin, TX 78745**

7 Amount of contribution (\$)

**\$100**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**3/29/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Dana Frandsen**

Contributor address; City; State; Zip Code

**6704 Poncha Pass, Austin TX 78749**

Amount of contribution (\$)

**\$350**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/18/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Melanie Gantt**

Contributor address; City; State; Zip Code

**2404 Forest Bend Drive, Austin, TX 78704**

Amount of contribution (\$)

**\$200**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**4/21/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**James Gentle**

Contributor address; City; State; Zip Code

**2006 Arthur Lane, Austin, TX 78704**

Amount of contribution (\$)

**\$250**

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

40

2 FILER NAME

Ann Kitchen

3 Filer ID (Ethics Commission Filers)

4 Date

6/29/18

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

David Glanzer

7 Amount of contribution (\$)

\$250

6 Contributor address; City; State; Zip Code

1219 S. Lamar Blvd #816, Austin, TX 78704

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

6/30/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Juliana Gonzales

Amount of contribution (\$)

\$50

Contributor address; City; State; Zip Code

1402 Sanchez St, Austin, TX 78702

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/30/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Linda Goss

Amount of contribution (\$)

\$250

Contributor address; City; State; Zip Code

9222 W. Parmer Lane, Austin, TX 78717

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/28/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mindy Graeber

Amount of contribution (\$)

\$25

Contributor address; City; State; Zip Code

1901 Edgeware Dr, Austin, TX 78704

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**6/17/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Ann S. Graham****6** Contributor address;

City; State; Zip Code

**3815 Avenue H, Austin TX 78751****7** Amount of contribution (\$)**\$200****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**6/19/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Sherri Greenberg**

Contributor address;

City; State; Zip Code

**2524 Tanglewood Trail, Austin, TX 78703**

Amount of contribution (\$)

**\$350**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**4/19/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Bob and Kay Gregory**

Contributor address;

City; State; Zip Code

**11911 Bradshaw Rd, Austin, TX 78747**

Amount of contribution (\$)

**\$700**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/23/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Rhonda Grover**

Contributor address;

City; State; Zip Code

**2607 Pinewood Terrace, Austin TX 78757**

Amount of contribution (\$)

**\$250**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**5/14/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Gopal and Vasu Guthikonda****6** Contributor address;

City; State; Zip Code

**P.O. Box 200388, Austin, TX 78720****7** Amount of contribution (\$)**\$700****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**6/30/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Sally Hahn**

Contributor address;

City; State; Zip Code

**3005 S. Lamar #D109-311, Austin, TX 78704**

Amount of contribution (\$)

**\$25**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**3/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Jerry Harris**

Contributor address;

City; State; Zip Code

**111 Congress Ave, STE 1400, Austin, TX 78701**

Amount of contribution (\$)

**\$25**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**3/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Ann Hartley**

Contributor address;

City; State; Zip Code

**2908 Toro Canyon Rd, Austin, TX 78746**

Amount of contribution (\$)

**\$100**

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**6/24/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Ann Hartley****6** Contributor address; City; State; Zip Code**2908 Toro Canyon Rd, Austin, TX 78746****7** Amount of contribution (\$)**\$100****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**3/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Melissa Hawthorne**

Contributor address; City; State; Zip Code

**1403 Foxwood Cove, Austin, TX 78704**

Amount of contribution (\$)

**\$350**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**4/12/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Veronica Hebert and Bruce Firtha**

Contributor address; City; State; Zip Code

**3701 Arapahoe Ave Unit C-116, Boulder, CO 80303**

Amount of contribution (\$)

**\$500**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/9/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Clarke Heidrick**

Contributor address; City; State; Zip Code

**3702 Eastledge Dr, Austin, TX 78731**

Amount of contribution (\$)

**\$350**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**3/28/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Jeremy Hendricks****6** Contributor address;

City; State; Zip Code

**1504 Rutland Dr., Austin, TX 78758****7** Amount of contribution (\$)**\$25****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**3/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Southwest Laborers District Council SWLDC PAC**

Contributor address;

City; State; Zip Code

**11720 East 21st St, Suite D, Tulsa, OK 74129**

Amount of contribution (\$)

**\$350**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/21/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**John Hernandez**

Contributor address;

City; State; Zip Code

**2117 Barton Hills Dr, Austin, TX 78704**

Amount of contribution (\$)

**\$200**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**3/26/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Matt Hersh**

Contributor address;

City; State; Zip Code

**1409 Gorham, Austin, TX 78758**

Amount of contribution (\$)

**\$100**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME

Ann Kitchen

**3** Filer ID (Ethics Commission Filers)**4** Date

4/2/18

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

John Howard

**6** Contributor address;

City; State; Zip Code

8537 Adirondack Trail, Austin, TX 78759

**7** Amount of contribution (\$)

\$100

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

5/29/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Derek Howard

Contributor address;

City; State; Zip Code

2005 Lakeshore Dr, Austin, TX 78746

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/30/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Celia Israel

Contributor address;

City; State; Zip Code

3604 Carla Drive, Austin, TX 78754

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/13/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ken Jacobs

Contributor address;

City; State; Zip Code

11004 Point Clear Ct, Austin, TX 78747

Amount of contribution (\$)

\$50

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**6/18/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Kim and Carol Johnson****6** Contributor address;

City; State; Zip Code

**2608 Del Curto Road, Unit 2, Austin, TX 78704****7** Amount of contribution (\$)**\$350****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**6/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Melissa Jones**

Contributor address;

City; State; Zip Code

**1203 A Elm ST, Austin, TX 78703**

Amount of contribution (\$)

**\$250**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/19/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Dick Kallerman**

Contributor address;

City; State; Zip Code

**2510 Cedarview, Austin, TX 78704**

Amount of contribution (\$)

**\$100**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**4/12/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Eileen Keller**

Contributor address;

City; State; Zip Code

**3905 Ridgelea Dr, Austin, TX 78731**

Amount of contribution (\$)

**\$250**

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**40****2** FILER NAME

Ann Kitchen

**3** Filer ID (Ethics Commission Filers)**4** Date

6/18/18

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Joseph Kitchen

**6** Contributor address; City; State; Zip Code

10310 Autumn Chase, Huntsville, ALA 35803

**7** Amount of contribution (\$)

\$100

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

6/28/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Paul Kitchen

Contributor address; City; State; Zip Code

3233 Forest Hill East Lane, LaGrange, TX 78945

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/29/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Greg Kitchen

Contributor address; City; State; Zip Code

1409 South Lamar St #202, Dallas, TX 75215

Amount of contribution (\$)

\$175

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/29/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Serena Kuvet

Contributor address; City; State; Zip Code

3112 Sunland Dr, Austin TX 78748

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**4/9/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Sarah Land****6** Contributor address;

City; State; Zip Code

**4710 Frontier Trail, Austin, TX 78745****7** Amount of contribution (\$)**\$100****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**6/30/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Leann Land**

Contributor address;

City; State; Zip Code

**4710 Frontier Trail, Austin, TX 78745**

Amount of contribution (\$)

**\$50**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**3/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Christopher Lehman**

Contributor address;

City; State; Zip Code

**1914 Larchmont Dr, Austin, TX 78704**

Amount of contribution (\$)

**\$350**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/29/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Cynthia Levinson**

Contributor address;

City; State; Zip Code

**3410 Windsor, Austin, TX 78703**

Amount of contribution (\$)

**\$100**

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.



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**3/28/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Paul Lin****6** Contributor address;

City; State; Zip Code

**5404 Rain Creek Parkway, Austin, TX 78759****7** Amount of contribution (\$)**\$350****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**3/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Lisa (Ping-Hui) Lin**

Contributor address;

City; State; Zip Code

**5404 Rain Creek Parkway, Austin, TX 78759**

Amount of contribution (\$)

**\$350**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**3/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Teresa Lin**

Contributor address;

City; State; Zip Code

**5404 Rain Creek Parkway, Austin, TX 78759**

Amount of contribution (\$)

**\$350**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/18/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Perry Lorenz**

Contributor address;

City; State; Zip Code

**1311-a East 6th St, Austin, TX 78702**

Amount of contribution (\$)

**\$350**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**3/28/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Robin Matthews****6** Contributor address;

City; State; Zip Code

**6303 Berkeley Cove, Austin, TX 78745****7** Amount of contribution (\$)**\$15****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**6/30/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Jack McCabe**

Contributor address;

City; State; Zip Code

**11805 Johnny Weismuller Lane, Austin, TX 78748**

Amount of contribution (\$)

**\$25**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Joyce McDonald**

Contributor address;

City; State; Zip Code

**123 Saguaro Dr, Buda, TX 78610**

Amount of contribution (\$)

**\$100**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/30/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Edward McHorse**

Contributor address;

City; State; Zip Code

**5202 Turnabout Lane, Austin, TX 78731**

Amount of contribution (\$)

**\$100**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**40****2** FILER NAME

Ann Kitchen

**3** Filer ID (Ethics Commission Filers)**4** Date

6/18/18

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Diana McIver

**6** Contributor address; City; State; Zip Code

4101 Parkstone Heights Dr, Suite 310, Austin, TX 78746

**7** Amount of contribution (\$)

\$350

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

3/28/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jana McCann

Contributor address; City; State; Zip Code

4000 Pinckney St, Austin, TX 78723

Amount of contribution (\$)

\$350

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/28/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Tom McHorse M.D.

Contributor address; City; State; Zip Code

5503 Ridge Oak Dr., Austin, TX 78731

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/29/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Robin McKeever

Contributor address; City; State; Zip Code

2507 Bluffview Dr, Austin, TX 78704

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**6/29/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Eleanor McKinney****6** Contributor address;

City; State; Zip Code

**2007 Kinney Ave, Austin, TX 78704****7** Amount of contribution (\$)**\$350****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**3/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**John McNabb**

Contributor address;

City; State; Zip Code

**10106 Pinehurst Dr., Austin, TX 78747**

Amount of contribution (\$)

**\$200**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/30/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Angela Melina Raab**

Contributor address;

City; State; Zip Code

**2606 Pegram Ave, Austin, TX 78757**

Amount of contribution (\$)

**\$25**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**3/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Wanda Mills**

Contributor address;

City; State; Zip Code

**2609 Coatbridge Dr, Austin, TX 78745**

Amount of contribution (\$)

**\$50**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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**1** Total pages Schedule A1:**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**3/28/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Kathy Mitchell****6** Contributor address;

City; State; Zip Code

**1403 Ulit Ave, Austin, TX 78702****7** Amount of contribution (\$)**\$100****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**6/30/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Terry Mitchell**

Contributor address;

City; State; Zip Code

**3212 Bridle Path, Austin, TX 78703**

Amount of contribution (\$)

**\$350**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/23/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Amy Wong Mok**

Contributor address;

City; State; Zip Code

**6301 Cat Mountain Cove, Austin, TX 78731**

Amount of contribution (\$)

**\$350**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**3/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Stephen Nagle**

Contributor address;

City; State; Zip Code

**1501 W. 6th St. A-2, Austin, TX 78703**

Amount of contribution (\$)

**\$100**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**6/29/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Mary Scott Nabers****6** Contributor address; City; State; Zip Code**901 S. Mopac Bldg I #100, Austin, TX 78746****7** Amount of contribution (\$)**\$25****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**3/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Elliott Naishtat**

Contributor address; City; State; Zip Code

**6401 Wilbur Dr, Austin, TX 78757**

Amount of contribution (\$)

**\$200**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/29/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Nancy Neavel**

Contributor address; City; State; Zip Code

**2905 Scenic Dr, Austin, TX 78703**

Amount of contribution (\$)

**\$25**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**3/26/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**David Newberger**

Contributor address; City; State; Zip Code

**2905 San Gabriel St Ste 218, Austin, TX 78705**

Amount of contribution (\$)

**\$250**

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**5/3/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Nona Niland****6** Contributor address; City; State; Zip Code**210 Lavaca St #3005, Austin, TX 78701****7** Amount of contribution (\$)**\$350****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**4/30/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Thomas and Sherine Nuckols**

Contributor address; City; State; Zip Code

**2910 Kassarine Pass, Austin, TX 78704**

Amount of contribution (\$)

**\$700**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/5/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Michael Oden**

Contributor address; City; State; Zip Code

**3213 French Place, Austin, TX 78722**

Amount of contribution (\$)

**\$150**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**3/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Sylvia Orozco**

Contributor address; City; State; Zip Code

**P.O. Box 2273, Austin, TX 78768**

Amount of contribution (\$)

**\$100**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**6/29/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Michael Osborne****6** Contributor address;

City; State; Zip Code

**909 West 23rd, Austin, TX 78705****7** Amount of contribution (\$)**\$350****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**4/12/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Phyllis Owens**

Contributor address;

City; State; Zip Code

**1709 St. Albans Blvd, Austin, TX 78745**

Amount of contribution (\$)

**\$50**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/29/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Phyllis Owens**

Contributor address;

City; State; Zip Code

**1709 St. Albans Blvd, Austin, TX 78745**

Amount of contribution (\$)

**\$25**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/29/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Charlotte Peterson**

Contributor address;

City; State; Zip Code

**9329 Lightwood Loop, Austin, TX 78748**

Amount of contribution (\$)

**\$100**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**6/29/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Janis and Joe Pinnelli****6** Contributor address;

City;

State;

Zip Code

**P.O.Box 50038, Austin, TX 78763****7** Amount of contribution (\$)**\$700****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**4/23/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Leslie Pool**

Contributor address;

City;

State;

Zip Code

**4503 Shoal Creek Blvd, Austin, TX 78756**

Amount of contribution (\$)

**\$350**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/30/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Dan Pruett**

Contributor address;

City;

State;

Zip Code

**6306 Clairmont Dr, Austin, TX 78749**

Amount of contribution (\$)

**\$100**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/27/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Clark Richards**

Contributor address;

City;

State;

Zip Code

**816 Congress Suite 1200, Austin, TX 78701**

Amount of contribution (\$)

**\$350**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**6/3/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Patricia Robertson****6** Contributor address;

City; State; Zip Code

**1010 Oak Meadow Drive, Dripping Springs, TX 78620****7** Amount of contribution (\$)**\$100****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**6/18/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**James and Rita Rodriguez**

Contributor address;

City; State; Zip Code

**5117 Prairie Dunes, Austin TX 78747**

Amount of contribution (\$)

**\$100**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/15/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Regina Rogoff**

Contributor address;

City; State; Zip Code

**1705 Schieffer Ave, Austin, TX 78722**

Amount of contribution (\$)

**\$100**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**3/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Lauren Ross**

Contributor address;

City; State; Zip Code

**1405 Hillmont, Austin, TX 78704**

Amount of contribution (\$)

**\$100**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

**40**

2 FILER NAME

**Ann Kitchen**

3 Filer ID (Ethics Commission Filers)

4 Date

**3/28/18**

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Therese Ruffing**

6 Contributor address;

City; State; Zip Code

**5512 Oakwood Cove Suite 181, Austin, TX 78731**

7 Amount of contribution (\$)

**\$100**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**6/25/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**James Russell**

Contributor address;

City; State; Zip Code

**1801B Ann Arbor Ave, Austin, TX 78704**

Amount of contribution (\$)

**\$350**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/19/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Kathleen Schneeman**

Contributor address;

City; State; Zip Code

**1903 Barton Parkway, Austin, TX 78704**

Amount of contribution (\$)

**\$250**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**3/26/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Robert Schneider**

Contributor address;

City; State; Zip Code

**2204 Thornton Rd, #6, Austin, TX 78704**

Amount of contribution (\$)

**\$50**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**40****2** FILER NAME

Ann Kitchen

**3** Filer ID (Ethics Commission Filers)**4** Date

6/19/18

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Steven Self

**6** Contributor address;

City; State; Zip Code

2403 Briargrove, Austin, TX 78704

**7** Amount of contribution (\$)

\$250

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

6/25/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Martha Smiley

Contributor address;

City; State; Zip Code

1502 West 5th, Austin, TX 78703

Amount of contribution (\$)

\$200

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/28/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Craig Smith

Contributor address;

City; State; Zip Code

1908 Barton Parkway, Austin, TX 78704

Amount of contribution (\$)

\$200

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/29/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bryan Sperry

Contributor address;

City; State; Zip Code

1809 Rabb Rd, Austin, TX 78704

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**40****2** FILER NAME

Ann Kitchen

**3** Filer ID (Ethics Commission Filers)**4** Date

3/28/18

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

DeDe Spontak

**6** Contributor address;

City; State; Zip Code

2103 Bluebonnet, Austin, TX 78704

**7** Amount of contribution (\$)

\$100

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

6/29/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Donna Squyres

Contributor address;

City; State; Zip Code

1110 West 7th, Austin, TX 78703

Amount of contribution (\$)

\$25

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/18/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Robin and Gayle Stallings

Contributor address;

City; State; Zip Code

2208 Santa Rosa St, Austin, TX 78702

Amount of contribution (\$)

\$350

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/17/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

David Sullivan

Contributor address;

City; State; Zip Code

1710 Waterston Ave, Austin, TX 78703

Amount of contribution (\$)

\$100

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**40****2** FILER NAME

Ann Kitchen

**3** Filer ID (Ethics Commission Filers)**4** Date

5/4/18

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Evan Taniguchi

**6** Contributor address;

City; State; Zip Code

1609 West 6th, Austin, TX 78703

**7** Amount of contribution (\$)

\$300

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

6/21/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Thomas Terkel

Contributor address;

City; State; Zip Code

1904 Newton St, Unit A, Austin, TX 78704

Amount of contribution (\$)

\$350

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/30/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Donna Tiemann

Contributor address;

City; State; Zip Code

3203 Cupid Dr, Austin, TX 78735

Amount of contribution (\$)

\$350

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/17/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Vicki Totten

Contributor address;

City; State; Zip Code

2003 Rabb Rd, Austin, TX 78704

Amount of contribution (\$)

\$50

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**40****2** FILER NAME**Ann Kitchen****3** Filer ID (Ethics Commission Filers)**4** Date**6/29/18****5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)**Andrew Tryba****6** Contributor address;

City; State; Zip Code

**801 West 5th St #2901, Austin, TX 78701****7** Amount of contribution (\$)**\$350****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

**3/27/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Preston Tyree**

Contributor address;

City; State; Zip Code

**4314 Vaughan St, Austin, TX 78723**

Amount of contribution (\$)

**\$50**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**3/28/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Walker Heyden**

Contributor address;

City; State; Zip Code

**6006 Cary Dr, Austin, TX 78757**

Amount of contribution (\$)

**\$50**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/30/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**David C. Walker**

Contributor address;

City; State; Zip Code

**6006 Cary Dr, Austin, TX 78757**

Amount of contribution (\$)

**\$350**

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

**40**

2 FILER NAME

**Ann Kitchen**

3 Filer ID (Ethics Commission Filers)

4 Date

**6/26/18**

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Ron and Sybi Ward**

6 Contributor address;

City; State; Zip Code

**2502 Briargrove, Austin, TX 78704**

7 Amount of contribution (\$)

**\$100**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**6/18/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Heather Way**

Contributor address;

City; State; Zip Code

**2108 Wright St, Austin, TX 78704**

Amount of contribution (\$)

**\$250**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/29/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Joelyn Weeks**

Contributor address;

City; State; Zip Code

**8701 Escarpment Blvd, Unit 131, Austin, TX 78749**

Amount of contribution (\$)

**\$100**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**3/29/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Michael Whellan**

Contributor address;

City; State; Zip Code

**4600 Laurel Canyon Dr, Austin, TX 78731**

Amount of contribution (\$)

**\$50**

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.



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**40****2** FILER NAME

Ann Kitchen

**3** Filer ID (Ethics Commission Filers)**4** Date

6/29/18

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kelly White

**6** Contributor address; City; State; Zip Code

613 W. 33rd St, Austin, TX 78705

**7** Amount of contribution (\$)

\$25

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

4/4/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kimberly White Erlinger

Contributor address; City; State; Zip Code

2505 Spring Creek Drive, Austin, TX 78704

Amount of contribution (\$)

\$250

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/29/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Marjorie Wood

Contributor address; City; State; Zip Code

2303 Comburg Castle Way, Austin, TX 78748

Amount of contribution (\$)

\$25

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/28/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Howard and Mary Yancy

Contributor address; City; State; Zip Code

100 Skyline Drive, Austin, TX 78746

Amount of contribution (\$)

\$700

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

**40**

2 FILER NAME

**Ann Kitchen**

3 Filer ID (Ethics Commission Filers)

4 Date

**6/18/18**

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Mary Yznaga**

6 Contributor address;

City; State; Zip Code

**1912 Goodrich, Austin, TX 78704**

7 Amount of contribution (\$)

**\$250**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**6/25/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Barbara Yznaga**

Contributor address;

City; State; Zip Code

**4300 Woodway Dr, Austin, TX 78731**

Amount of contribution (\$)

**\$350**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/27/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Ralph and Jerrienne Yznaga**

Contributor address;

City; State; Zip Code

**9204 Stallion Dr, Austin, TX 78733**

Amount of contribution (\$)

**\$500**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/29/18**

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**United Assoc of Journeymen & Apprentices  
of the Plumbing & Pipefitting IND**

Contributor address;

City; State; Zip Code

**814 Airport Blvd, Austin, TX 78702**

Amount of contribution (\$)

**\$350**

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.

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**40****2** FILER NAME

Ann Kitchen

**3** Filer ID (Ethics Commission Filers)**4** Date

6/28/18

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Austin Firefighters PAC

**6** Contributor address;

City; State; Zip Code

7537 Cameron Rd, Austin, TX 78752

**7** Amount of contribution (\$)

\$350

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

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.

**PLEDGED CONTRIBUTIONS****SCHEDULE B**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

8

2 FILER NAME

Ann Kitchen

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES

\$

5 Date

6/13/18

6 Full name of pledgor

☐ out-of-state PAC (ID#:

Hill Abel

7 Pledgor address;

City; State; Zip Code

1607 Kerr Ave, Austin, TX 78704

8 Amount of Pledge \$

\$350

9 In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

6/15/18

Full name of pledgor

☐ out-of-state PAC (ID#:

Steve Bercu

Pledgor address;

City; State; Zip Code

4108 Burnet Rd, Austin, TX 78756

Amount of Pledge \$

\$50

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/30/18

Full name of pledgor

☐ out-of-state PAC (ID#:

Jay Boisseau

Pledgor address;

City; State; Zip Code

360 Nueces St, Apt 3005, Austin, TX 78701

Amount of Pledge \$

\$350

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/14/18

Full name of pledgor

☐ out-of-state PAC (ID#:

Brandi Burton

Pledgor address;

City; State; Zip Code

4509 Sinclair Ave, Austin, TX 78756

Amount of Pledge \$

\$10

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**PLEDGED CONTRIBUTIONS****SCHEDULE B**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

8

2 FILER NAME

Ann Kitchen

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES

\$

5 Date

6/21/18

6 Full name of pledgor

☐ out-of-state PAC (ID#)

Michael Cannatti

7 Pledgor address;

City; State; Zip Code

2100 Stamford Lane, Austin, TX 78703

8 Amount of Pledge \$

\$50

9 In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

6/27/18

Full name of pledgor

☐ out-of-state PAC (ID#)

George Cofer

Pledgor address;

City; State; Zip Code

3306 Gentry Dr, Austin, TX 78746

Amount of Pledge \$

\$50

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/29/18

Full name of pledgor

☐ out-of-state PAC (ID#)

Cathy Echols

Pledgor address;

City; State; Zip Code

508 Harris, Austin, TX 78705

Amount of Pledge \$

\$50

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/19/18

Full name of pledgor

☐ out-of-state PAC (ID#)

Chiquita Eugene

Pledgor address;

City; State; Zip Code

10101 Pinehurst Drive, Austin, TX 78747

Amount of Pledge \$

\$100

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

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.

**PLEDGED CONTRIBUTIONS****SCHEDULE B**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

8

2 FILER NAME

Ann Kitchen

3 Filer ID: (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES

\$

5 Date

6/19/18

6 Full name of pledgor

☐ out-of-state PAC (ID#:

Cathy Gattuso

7 Pledgor address;

City; State; Zip Code

2403 Dipcove, Austin, TX 78704

8 Amount of Pledge \$

\$100

9 In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

4/12/18

Full name of pledgor

☐ out-of-state PAC (ID#:

Greg Hartman

Pledgor address;

City; State; Zip Code

3307 Winding Creek Dr, Austin, TX 78735

Amount of Pledge \$

\$350

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/7/18

Full name of pledgor

☐ out-of-state PAC (ID#:

David Hilgers

Pledgor address;

City; State; Zip Code

701 Yaupon Valley Rd, Austin, TX 78746

Amount of Pledge \$

\$200

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/18/18

Full name of pledgor

☐ out-of-state PAC (ID#:

Aletha Huston

Pledgor address;

City; State; Zip Code

908 Bluebonnet Lane, Austin, TX 78704

Amount of Pledge \$

\$100

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

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.

**PLEDGED CONTRIBUTIONS****SCHEDULE B**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

8

2 FILER NAME

Ann Kitchen

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES

\$

5 Date

6/24/18

6 Full name of pledgor

☐ out-of-state PAC (ID#:

Richard Jung

7 Pledgor address;

City; State; Zip Code

600 Congress, Austin, TX 78701

8 Amount of Pledge \$

\$100

9 In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

6/13/18

Full name of pledgor

☐ out-of-state PAC (ID#:

Helen Kitchen

Pledgor address;

City; State; Zip Code

101 Hawthorn Rd, Sheffield S64LJ, UK

Amount of Pledge \$

\$100

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/14/18

Full name of pledgor

☐ out-of-state PAC (ID#:

Rosemary Lehmberg

Pledgor address;

City; State; Zip Code

2606 Deerfoot Trail, Austin, TX 78704

Amount of Pledge \$

\$50

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/28/18

Full name of pledgor

☐ out-of-state PAC (ID#:

Sharlene Leurig

Pledgor address;

City; State; Zip Code

1709 B Kinney Ave, Austin, TX 78704

Amount of Pledge \$

\$50

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

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.

**PLEDGED CONTRIBUTIONS****SCHEDULE B**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule B:**8****2** FILER NAME

Ann Kitchen

**3** Filer ID (Ethics Commission Filers)**4** TOTAL OF UNITEMIZED PLEDGES

\$

**5** Date

6/19/18

**6** Full name of pledgor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kevin Lewis

**7** Pledgor address; City; State; Zip Code

1002 Bouldin Ave, Austin, TX 78704

**8** Amount of Pledge \$

\$50

**9** In-kind contribution description☐ Check if travel outside of Texas. Complete Schedule T.**10** Principal occupation / Job title (See Instructions)**11** Employer (See Instructions)

Date

6/30/18

Full name of pledgor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Eliza May

Pledgor address; City; State; Zip Code

4813 Eagle Feather Dr, Austin, TX 78735

Amount of Pledge \$

\$100

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/21/18

Full name of pledgor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jonathan Ogren

Pledgor address; City; State; Zip Code

2404 Willow St, Austin, TX 78702

Amount of Pledge \$

\$50

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/18/18

Full name of pledgor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Danny Roth

Pledgor address; City; State; Zip Code

1214 West 6th, STE 220, Austin, TX 78703

Amount of Pledge \$

\$200

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

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.



**PLEDGED CONTRIBUTIONS****SCHEDULE B**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

**8**

2 FILER NAME

**Ann Kitchen**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES

\$

5 Date

**6/30/18**6 Full name of pledgor ☐ out-of-state PAC (ID#:**Brigid Shea**

7 Pledgor address; City; State; Zip Code

**2604 Geraghty, Austin, TX 78757**

8 Amount of Pledge \$

**\$100**

9 In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

**6/16/18**Full name of pledgor ☐ out-of-state PAC (ID#:**Tom "Smitty" Smith and Karen Hadden**

Pledgor address; City; State; Zip Code

**605 Charismatic Lane, Austin, TX 78748**

Amount of Pledge \$

**\$300**

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**4/18/18**Full name of pledgor ☐ out-of-state PAC (ID#:**Bill Spelman**

Pledgor address; City; State; Zip Code

**3802 Ave F, Austin, TX 78751**

Amount of Pledge \$

**\$100**

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/15/18**Full name of pledgor ☐ out-of-state PAC (ID#:**Betty Weed**

Pledgor address; City; State; Zip Code

**2818 Alta Vista, Austin, TX 78704**

Amount of Pledge \$

**\$50**

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

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.

**PLEDGED CONTRIBUTIONS****SCHEDULE B**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

**8**

2 FILER NAME

**Ann Kitchen**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES

\$

5 Date

**6/16/18**

6 Full name of pledgor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Melba and Ted Whatley**

7 Pledgor address;

City; State; Zip Code

**P.O. Box 5623, Austin, TX 78763**

8 Amount of Pledge \$

**\$700**

9 In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

**6/30/18**

Full name of pledgor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Sarah Wheat**

Pledgor address;

City; State; Zip Code

**1806 Westridge Dr, Austin, TX 78704**

Amount of Pledge \$

**\$100**

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/20/18**

Full name of pledgor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Bruce Willenzik**

Pledgor address;

City; State; Zip Code

**4428 Gillis, Austin, TX 78745**

Amount of Pledge \$

**\$200**

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/13/18**

Full name of pledgor

☐ out-of-state PAC (ID#: \_\_\_\_\_)**Kaiba White**

Pledgor address;

City; State; Zip Code

**5303 Summer Circle, Austin, TX 78741**

Amount of Pledge \$

**\$10**

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

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.**

**PLEDGED CONTRIBUTIONS****SCHEDULE B**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

8

2 FILER NAME

Ann Kitchen

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES

\$

5 Date

6/19/18

6 Full name of pledgor

☐ out-of-state PAC (ID#:

Elizabeth Yznaga

7 Pledgor address; City; State; Zip Code

1079 Pine Dr, Felton, CA 95018

Text

8 Amount of Pledge \$

\$200

9 In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID#:

Pledgor address; City; State; Zip Code

Amount of Pledge \$

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID#:

Pledgor address; City; State; Zip Code

Amount of Pledge \$

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID#:

Pledgor address; City; State; Zip Code

Amount of Pledge \$

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

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.

**LOANS****SCHEDULE E**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule E:**1****2** FILER NAME

Ann Kitchen

**3** Filer ID (Ethics Commission Filers)**4** TOTAL OF UNITEMIZED LOANS

\$

**5** Date of loan

1/1/18

**7** Name of lender☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ann Kitchen and Mark Yznaga

**9** Loan Amount (\$)

\$195.36

**6** Is lender  
a financial  
Institution?

Y

N

**8** Lender address;

City;

State;

Zip Code

2401 Briargrove, Austin, TX 78704

**10** Interest rate

0

**11** Maturity date

NA

**12** Principal occupation / Job title (See Instructions)**13** Employer (See Instructions)**14** Description of Collateral☐ none**15** Check if personal funds were deposited into political  
account (See Instructions)☐**16** GUARANTOR  
INFORMATION**17** Name of guarantor**19** Amount Guaranteed (\$)**18** Guarantor address;

City;

State;

Zip Code

☐ not applicable**20** Principal Occupation (See Instructions)**21** Employer (See Instructions)

Date of loan

Name of lender

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Loan Amount (\$)

Is lender  
a financial  
Institution?

Y

N

Lender address;

City;

State;

Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☐ noneCheck if personal funds were deposited into political  
account (See Instructions)☐GUARANTOR  
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address;

City;

State;

Zip Code

☐ not applicable

Principal Occupation (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES MADE 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:                                   |  | 2 FILER NAME<br><b>Ann Kitchen</b>  |  | 3 Filer ID (Ethics Commission Filers)<br><b>1</b>   |  |
| 4 Date<br><b>5/1/18</b>                                      |  | 5 Payee name<br><b>Michael's</b>  |  |   |  |
| 6 Amount (\$)<br><b>\$10.38</b>                              |  | 7 Payee address; City; State; Zip Code<br><b>3201 Bee Caves Rd, STE 112, Austin, TX 78746</b> |  |   |  |
| 8<br><b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                   |  | (a) Category (See Categories listed at the top of this schedule)<br><b>Event Expense</b>      |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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<br><b>6/30/18</b>                                       |  | Payee name<br><b>Prosperity Bank</b>  |  |   |  |
| Amount (\$)<br><b>\$68.00</b>                                |  | Payee address; City; State; Zip Code<br><b>900 Congress Ave, Austin, TX 78701</b>             |  |   |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                        |  | Category (See Categories listed at the top of this schedule)<br><b>Accounting Expense</b>     |  | Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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 (\$)  |  | Payee address; City; State; Zip Code  |  |   |  |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                        |  | Category (See Categories listed at the top of this schedule)                                  |  | Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### 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 G:<br><b>8</b>  | <b>2</b> FILER NAME<br><b>Ann Kitchen</b>  | <b>3</b> Filer ID (Ethics Commission Filers)  |
| <b>4</b> Date<br><b>3/28/18</b>   | <b>5</b> Payee name<br><b>COA Permit Center</b>  |   |
| <b>6</b> Amount (\$)<br><b>\$38.17</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br><b>505 Barton Springs Rd, Austin, TX 78704</b>                  |   |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br><b>Office Overhead/rental expense</b> | <b>(b)</b> Description:<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  |   |
|   | Candidate / Officeholder name  | Office sought      Office held  |

|  |   |   |
|--|---|---|
| Date<br><b>2/23/18</b>   | Payee name<br><b>Constant Contact</b>   |   |
| Amount (\$)<br><b>\$47.97</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code<br><b>3675 Precision Dr, Loveland, CO 80538</b>                    |   |
| <b>PURPOSE OF EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br><b>Solicitation/fundraising expense</b> | <b>(b)</b> Description:<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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<br><b>3/18/18</b>   | Payee name<br><b>Constant Contact</b>   |   |
| Amount (\$)<br><b>\$74.62</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code<br><b>3675 Precision Dr, Loveland, CO 80538</b>                    |   |
| <b>PURPOSE OF EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br><b>Solicitation/fundraising expense</b> | <b>(b)</b> Description:<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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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# POLITICAL EXPENDITURES MADE 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.

|  |  |  |                               |               |             |
|--|--|--|-------------------------------|---------------|-------------|
| <b>1</b> Total pages Schedule G:   | <b>2</b> FILER NAME  | <b>3</b> Filer ID (Ethics Commission Filers)   |                               |               |             |
| <b>8</b>   | <b>Ann Kitchen</b>   |  |                               |               |             |
| <b>4</b> Date<br><b>4/18/18</b>  | <b>5</b> Payee name<br><b>Constant Contact</b>   |  |                               |               |             |
| <b>6</b> Amount (\$)<br><b>\$74.62</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended  | <b>7</b> Payee address; City; State; Zip Code<br><b>3675 Precision Dr, Loveland, CO 80538</b>                      |  |                               |               |             |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br><b>Solicitation/fundraising expense</b> | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |                               |               |             |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH  |  |  |                               |               |             |
| <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">Candidate / Officeholder name</td> <td style="width: 25%;">Office sought</td> <td style="width: 25%;">Office held</td> </tr> </table> |  |  | Candidate / Officeholder name | Office sought | Office held |
| Candidate / Officeholder name  | Office sought  | Office held  |                               |               |             |
|  |  |  |                               |               |             |
| Date<br><b>5/18/18</b>   | Payee name<br><b>Constant Contact</b>  |  |                               |               |             |
| Amount (\$)<br><b>\$74.62</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended   | Payee address; City; State; Zip Code<br><b>3675 Precision Dr, Loveland, CO 80538</b>                               |  |                               |               |             |
| <b>PURPOSE OF EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br><b>Solicitation/fundraising expense</b>            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |                               |               |             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  |  |                               |               |             |
| <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">Candidate / Officeholder name</td> <td style="width: 25%;">Office sought</td> <td style="width: 25%;">Office held</td> </tr> </table> |  |  | Candidate / Officeholder name | Office sought | Office held |
| Candidate / Officeholder name  | Office sought  | Office held  |                               |               |             |
|  |  |  |                               |               |             |
| Date<br><b>6/18/18</b>   | Payee name<br><b>Constant Contact</b>  |  |                               |               |             |
| Amount (\$)<br><b>\$74.62</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended   | Payee address; City; State; Zip Code<br><b>3675 Precision Dr, Loveland, CO 80538</b>                               |  |                               |               |             |
| <b>PURPOSE OF EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br><b>Solicitation/fundraising expense</b>            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |                               |               |             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  |  |                               |               |             |
| <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">Candidate / Officeholder name</td> <td style="width: 25%;">Office sought</td> <td style="width: 25%;">Office held</td> </tr> </table> |  |  | Candidate / Officeholder name | Office sought | Office held |
| Candidate / Officeholder name  | Office sought  | Office held  |                               |               |             |
|  |  |  |                               |               |             |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>   |  |  |                               |               |             |

# POLITICAL EXPENDITURES MADE 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         | Printing Expense               | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor  | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                |                                | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule G:<br><b>8</b>   | <b>2</b> FILER NAME<br><b>Ann Kitchen</b>  | <b>3</b> Filer ID (Ethics Commission Filers)   |
| <b>4</b> Date:<br><b>2/26/18</b>   | <b>5</b> Payee name<br><b>GoDaddy</b>  |  |
| <b>6</b> Amount (\$)<br><b>\$162.93</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br><b>14455 N.Hayden Rd STE 226, Scottsdale, Arizona 85260</b>     |  |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br><b>Office overhead/rental expense</b> | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH  |  |  |
|  | Candidate / Officeholder name  | Office sought      Office held   |

|   |  |  |
|---|--|--|
| Date<br><b>3/22/18</b>  | Payee name<br><b>GoDaddy</b>   |  |
| Amount (\$)<br><b>\$127.79</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code<br><b>14455 N.Hayden Rd, Suite 226, Scottsdale, Arizona 85260</b> |  |
| <b>PURPOSE OF EXPENDITURE</b>   | Category (See Categories listed at the top of this schedule)<br><b>Office overhead/rental expense</b>  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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<br><b>3/19/18</b>   | Payee name<br><b>GoDaddy</b>  |  |
| Amount (\$)<br><b>\$14.99</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code<br><b>14455 N.Hayden Rd, Suite 226, Scottsdale, Arizona 85260</b>  |  |
| <b>PURPOSE OF EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br><b>Office overhead / rental expense</b> | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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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# POLITICAL EXPENDITURES MADE 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:<br><b>8</b> | 2 FILER NAME<br><b>Ann Kitchen</b> | 3 Filer ID (Ethics Commission Filers) |
|---------------------------------------|------------------------------------|---------------------------------------|

|                          |  |
|--------------------------|--|
| 4 Date<br><b>3/28/18</b> | 5 Payee name<br><b>Groovee Fortune</b> |
|--------------------------|--|

|  |   |
|--|---|
| 6 Amount (\$)<br><b>\$42.00</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code<br><b>13021 Stagecoach Way, Manchaca, TX 78652</b> |
|--|---|

|                          |   |   |
|--------------------------|---|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br><b>Consulting expense</b> | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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<br><b>3/28/18</b>  | Payee name<br><b>Groovee Fortune</b>  |
| Amount (\$)<br><b>\$257.50</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code<br><b>13021 Stagecoach Way, Manchaca, TX 78652</b> |

|                        |   |   |
|------------------------|---|---|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule)<br><b>Consulting expense</b> | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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<br><b>3/2/18</b>  | Payee name<br><b>Groovee Fortune</b>  |
| Amount (\$)<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code<br><b>13021 Stagecoach Way, Manchaca, TX 78652</b> |

|                        |   |   |
|------------------------|---|---|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule)<br><b>Consulting expense</b> | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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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# POLITICAL EXPENDITURES MADE 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule G:<br><b>8</b>   | <b>2</b> FILER NAME<br><b>Ann Kitchen</b>   | <b>3</b> Filer ID (Ethics Commission Filers)   |
| <b>4</b> Date<br><b>3/7/18</b>   | <b>5</b> Payee name<br><b>Groovee Fortune</b>   |  |
| <b>6</b> Amount (\$)<br><b>\$257.50</b><br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br><br><b>13021 Stagecoach Way, Manchaca, TX 78652</b>              |  |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>  | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br><br><b>Consulting expense</b>          | <b>(b) Description</b><br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH  |   |  |
| Candidate / Officeholder name      Office sought      Office held  |   |  |
|  |   |  |
| Date<br><b>4/11/18</b>   | Payee name<br><b>Harland Checks</b>   |  |
| Amount (\$)<br><b>\$42.25</b><br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended           | Payee address; City; State; Zip Code<br><br><b>15955 La Contera Parkway, San Antonio, TX 78256</b>                |  |
| <b>PURPOSE OF EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br><br><b>Accounting expense</b>                     | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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<br><b>3/11/18</b>   | Payee name<br><b>I Stock Photos</b>   |  |
| Amount (\$)<br><b>\$12.99</b><br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended           | Payee address; City; State; Zip Code<br><br><b>Suite 313 - 1240 20th Ave SE, Calgary Alberta T2g, 1MB, Canada</b> |  |
| <b>PURPOSE OF EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br><br><b>Advertising expense</b>                    | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### 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 G:<br><b>8</b> | 2 FILER NAME<br><b>Ann Kitchen</b> | 3 Filer ID (Ethics Commission Filers) |
|---------------------------------------|------------------------------------|---------------------------------------|

|                          |                                       |
|--------------------------|---------------------------------------|
| 4 Date<br><b>3/19/18</b> | 5 Payee name<br><b>I Stock Photos</b> |
|--------------------------|---------------------------------------|

|  |  |
|--|--|
| 6 Amount (\$)<br><b>\$12.99</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code<br><b>Suite 313 - 1240 20th Ave. SE, Calgary, Alberta T2g 1MB, Canada</b> |
|--|--|

|                                 |  |   |
|---------------------------------|--|---|
| 8 <b>PURPOSE OF EXPENDITURE</b> | (a) Category (See Categories listed at the top of this schedule)<br><b>Advertising expense</b> | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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<br><b>3/28/18</b>   | Payee name<br><b>Matts El Rancho</b>  |
| Amount (\$)<br><b>\$ 2,881.26</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code<br><b>2613 South Lamar, Austin, TX 78704</b> |

|                               |  |   |
|-------------------------------|--|---|
| <b>PURPOSE OF EXPENDITURE</b> | Category (See Categories listed at the top of this schedule)<br><b>Food/Beverage expense</b> | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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<br><b>3/28/18</b>  | Payee name<br><b>Office Max</b>   |
| Amount (\$)<br><b>\$105.13</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code<br><b>907 West 5th, Austin, TX 78701</b> |

|                               |  |   |
|-------------------------------|--|---|
| <b>PURPOSE OF EXPENDITURE</b> | Category (See Categories listed at the top of this schedule)<br><b>Event expense</b> | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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

# POLITICAL EXPENDITURES MADE 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                        |                               |                                |  |

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|                                       |                                    |                                       |
|---------------------------------------|------------------------------------|---------------------------------------|
| 1 Total pages Schedule G:<br><b>8</b> | 2 FILER NAME<br><b>Ann Kitchen</b> | 3 Filer ID (Ethics Commission Filers) |
|---------------------------------------|------------------------------------|---------------------------------------|

|                          |                                   |
|--------------------------|-----------------------------------|
| 4 Date<br><b>4/11/18</b> | 5 Payee name<br><b>Office Max</b> |
|--------------------------|-----------------------------------|

|  |   |
|--|---|
| 6 Amount (\$)<br><b>\$24.75</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code<br><b>907 West 5th, Austin, TX 78701</b> |
|--|---|

|                                 |   |   |
|---------------------------------|---|---|
| 8 <b>PURPOSE OF EXPENDITURE</b> | (a) Category (See Categories listed at the top of this schedule)<br><b>Office overhead/rental expense</b> | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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<br><b>4/11/18</b>  | Payee name<br><b>Office Max</b>   |
| Amount (\$)<br><b>\$7.57</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code<br><b>907 West 5th, Austin, TX 78701</b> |

|                               |   |   |
|-------------------------------|---|---|
| <b>PURPOSE OF EXPENDITURE</b> | Category (See Categories listed at the top of this schedule)<br><b>Office overhead/rental expense</b> | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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<br><b>6/28/18</b>  | Payee name<br><b>PayPal</b>  |
| Amount (\$)<br><b>\$719.55</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code<br><b>2211 North First St, San Jose, CA 95131</b> |

|                               |  |   |
|-------------------------------|--|---|
| <b>PURPOSE OF EXPENDITURE</b> | Category (See Categories listed at the top of this schedule)<br><b>Soliciation/fundraising</b> | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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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Office Overhead/Rental Expense  
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Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

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|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule G:<br><b>8</b>   | <b>2</b> FILER NAME<br><b>Ann Kitchen</b>  | <b>3</b> Filer ID (Ethics Commission Filers)   |
| <b>4</b> Date<br><b>4/11/18</b>  | <b>5</b> Payee name<br><b>U.S. Post Office</b>   |  |
| <b>6</b> Amount (\$)<br><b>\$50</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br><b>3201 Bee Caves Rd, STE 120, Austin, TX 78746</b>             |  |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br><b>Office overhead/rental expense</b> | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate / Officeholder name  | Office sought      Office held   |

|  |   |  |
|--|---|--|
| Date<br><b>2/9/18</b>  | Payee name<br><b>US Post Office</b>   |  |
| Amount (\$)<br><b>\$190</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code<br><b>3201 Bee Caves Rd, STE 120, Austin, TX 78746</b>           |  |
| <b>PURPOSE OF EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br><b>Office overhead/rental expense</b> | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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 (\$)<br><br><input type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code                         |  |
| <b>PURPOSE OF EXPENDITURE</b>   | Category (See Categories listed at the top of this schedule) | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><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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