

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID		2 Total pages filed: 24	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Paige	MI	OFFICE USE ONLY Date Received OCT 9 '18 PM 4:11	
	NICKNAME	LAST Ellis	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 160233 Austin, TX 78716			ZIP CODE	
	Date Hand-delivered or Date Postmarked				
	Receipt #		Amount		
	Date Processed				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Ashley	MI		
	NICKNAME	LAST Bliss Lima	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2102 West 12th Street Austin, TX 78703				
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year 07/01/2018		THROUGH Month Day Year 09/27/2018		
10 ELECTION	ELECTION DATE Month Day Year 11/06/2018		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known) Austin City Council District 8	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

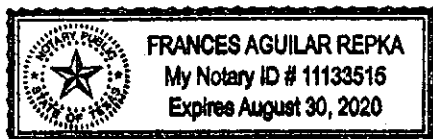
FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Ellis, Paige		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL		
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 54.52
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,171.32
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 3,100.10
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 13,576.33
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,500.00

17 AFFADAVIT

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

Paige Ellis
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Paige Ellis, this the 9TH day of October, 2018, to certify which, witness my hand and seal of office.

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

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

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18 FILER NAME Ellis, Paige		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,171.32
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,100.10
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/14 Rpt: 4/24
2 FILER NAME Ellis, Paige		3 Filer ID
4 Date 07/01/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackmann, Martha <hr/> 6 Contributor address; City; State; Zip Code 41 Depot Road Leverett, MD 01054	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Writer
Date 08/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackmann, Martha <hr/> Contributor address; City; State; Zip Code 41 Depot Road Leverett, MD 01054	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Writer
Date 09/23/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackmann, Martha <hr/> Contributor address; City; State; Zip Code 41 Depot Road Leverett, MD 01054	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Writer
Date 09/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Chad <hr/> Contributor address; City; State; Zip Code 1414 Tuffit Lane Austin, TX 78753	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Self Employed
Date 08/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrade, Alex <hr/> Contributor address; City; State; Zip Code 3433 Purdue Avenue Dallas, TX 75225	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Bulle Rock Capital

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/14 Rpt: 5/24
2 FILER NAME Ellis, Paige		3 Filer ID
4 Date 09/27/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Margie <hr/> 6 Contributor address; City; State; Zip Code 1205 Kinney Ave. unit A Austin, TX 78704	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) media producer		9 Employer (See Instructions) Self Employed
Date 07/17/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berner, Daniel <hr/> Contributor address; City; State; Zip Code 7000 N. Mopac Expwy suite 200 Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Berner Law PLLC
Date 07/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bliss Lima, Ashley <hr/> Contributor address; City; State; Zip Code 2102 West 12th Street Austin, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Office of Strategy and Policy		Employer (See Instructions) The University of Texas at Austin
Date 08/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bliss Lima, Ashley <hr/> Contributor address; City; State; Zip Code 2102 West 12th Street Austin, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Office of Strategy and Policy		Employer (See Instructions) The University of Texas at Austin
Date 09/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brand, Matthew <hr/> Contributor address; City; State; Zip Code 57 Wood Rd Bedford Hills, NY 10507	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Copywriter		Employer (See Instructions) Havas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/14 Rpt: 6/24
2 FILER NAME Ellis, Paige		3 Filer ID
4 Date 09/26/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cain, Andrew <hr/> 6 Contributor address; City; State; Zip Code 1474 Norman Avenue San Jose, CA 95125	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Law Foundation of Silicon Valley
Date 09/25/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrasco, Sallie <hr/> Contributor address; City; State; Zip Code 602 Fort Drum Drive Austin, TX 78745	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catanzaro, Zac <hr/> Contributor address; City; State; Zip Code 2003 E 11th St Austin, TX 78702	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self Employed
Date 09/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catanzaro, Zac <hr/> Contributor address; City; State; Zip Code 2003 E 11th St Austin, TX 78702	Amount of Contribution (\$) \$20.18
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self Employed
Date 09/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Susan <hr/> Contributor address; City; State; Zip Code 2655 Gate Ridge Drive Austin, TX 78748	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/14 Rpt: 7/24
2 FILER NAME Ellis, Paige		3 Filer ID
4 Date 09/26/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Susan 6 Contributor address; City; State; Zip Code 2655 Gate Ridge Drive Austin, TX 78748	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dow, Jim Contributor address; City; State; Zip Code 504 W 12th Street Austin, TX 78701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Cross Oak Group
Date 09/25/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyel, Elizabeth Contributor address; City; State; Zip Code 4209 Burnet Rd Apt 102 Austin, TX 78756	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed
Date 09/25/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Espinoza, Albert M. Contributor address; City; State; Zip Code 6006 Loomis Street Lakewood, CA 90713	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Self Employed
Date 09/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Espinoza Jr., Albert Contributor address; City; State; Zip Code 6336 California Avenue Long Beach, CA 90805	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/14 Rpt: 8/24
2 FILER NAME Ellis, Paige		3 Filer ID
4 Date 07/02/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Edgar 6 Contributor address; City; State; Zip Code 17603 Columbia Falls Cv Round Rock, TX 78681	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Outreach Program Coordinator		9 Employer (See Instructions) The University of Texas at Austin
Date 07/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Edgar Contributor address; City; State; Zip Code 17603 Columbia Falls Cv Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Outreach Program Coordinator		Employer (See Instructions) The University of Texas at Austin
Date 08/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Edgar Contributor address; City; State; Zip Code 17603 Columbia Falls Cv Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Outreach Program Coordinator		Employer (See Instructions) The University of Texas at Austin
Date 09/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Edgar Contributor address; City; State; Zip Code 10100 Burnet Rd Bldg. 196 Austin, TX 78758	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Program Coordinator		Employer (See Instructions) The university of Texas at Austin
Date 09/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Susan Contributor address; City; State; Zip Code 17603 Columbia Falls Cove Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) TML Multistate

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/14 Rpt: 9/24
2 FILER NAME Ellis, Paige		3 Filer ID
4 Date 09/27/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Saul <hr/> 6 Contributor address; City; State; Zip Code 305 Chippendale Ave Austin, TX 78745	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Cancer Information Specialist		9 Employer (See Instructions) American Cancer Society
Date 07/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Joaquin <hr/> Contributor address; City; State; Zip Code 4819 Guadalupr Trail NW Albuquerque, NM 87107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed
Date 08/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Joaquin <hr/> Contributor address; City; State; Zip Code 4819 Guadalupr Trail NW Albuquerque, NM 87107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed
Date 07/20/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Victoria <hr/> Contributor address; City; State; Zip Code 1175 Park Ave Ny NY 10128 NY, NY 10128	Amount of Contribution (\$) \$20.21
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/17/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Victoria <hr/> Contributor address; City; State; Zip Code 1175 Park Ave Ny NY 10128 NY, NY 10128	Amount of Contribution (\$) \$99.23
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/14 Rpt: 10/24
2 FILER NAME Ellis, Paige		3 Filer ID
4 Date 08/25/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Barbara	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 2611 bee caves rd #143 Austin, TX 78746	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Nathan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 3229 West Saint Catherine Avenue Phoenix, AZ 85041	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Midwestern University
Date 09/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Ashley	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 1409 Quaker Ridge Drive Austin, TX 78746	
Principal occupation / Job title (See Instructions) stylist		Employer (See Instructions) Self Employed
Date 09/25/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Ryan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code 2601 Sweet Clover Drive Austin, TX 78745	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Handsome
Date 09/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) La Fountain, Peter	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code 400 New Jersey Avenue Southeast Washington, DC 20003	
Principal occupation / Job title (See Instructions) Legislative Assistant		Employer (See Instructions) U.S. House

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/14 Rpt: 11/24
2 FILER NAME Ellis, Paige		3 Filer ID
4 Date 09/10/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lady, Derek <hr/> 6 Contributor address; City; State; Zip Code 444 N Sierra Bonita Avenue #2 Los Angeles, CA 90036	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) Student
Date 09/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Michael <hr/> Contributor address; City; State; Zip Code 3018 S 1st St Apt 117 Austin, TX 78704	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Account Executive		Employer (See Instructions) VMware
Date 09/18/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leyton, Athena <hr/> Contributor address; City; State; Zip Code 507 pressler #4133 Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leyton, Athena <hr/> Contributor address; City; State; Zip Code 507 pressler #4133 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lively, Vanessa <hr/> Contributor address; City; State; Zip Code 2945 Lagerway Cove Austin, TX 78748	Amount of Contribution (\$) \$20.18
Principal occupation / Job title (See Instructions) musician and artist		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/14 Rpt: 12/24
2 FILER NAME Ellis, Paige		3 Filer ID
4 Date 09/26/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcglothlin, Russell <hr/> 6 Contributor address; City; State; Zip Code 10696 Calle Quebrada Goleta, CA 93117	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Brownstein Hyatt Farber Schreck LLP
Date 09/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miguel Suazo Campaign <hr/> Contributor address; City; State; Zip Code PO Box 341527 Austin, TX 78734	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monsees, Richard <hr/> Contributor address; City; State; Zip Code 5306 Summerset Trail Austin, TX 78749	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Amusement and vending machines		Employer (See Instructions) Gatti's Pizza
Date 07/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pharris, Mary <hr/> Contributor address; City; State; Zip Code 539A COURT STREET SECOND FLOOR Brooklyn, NY 11231	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Fairygodboss
Date 08/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pharris, Mary <hr/> Contributor address; City; State; Zip Code 539A COURT STREET SECOND FLOOR Brooklyn, NY 11231	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Fairygodboss

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/14 Rpt: 13/24
2 FILER NAME Ellis, Paige		3 Filer ID
4 Date 08/30/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raison, Sarah Beth <hr/> 6 Contributor address; City; State; Zip Code 6722 Avenue P Houston, TX 77011	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) Frontier Utilities
Date 09/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocap, Blake <hr/> Contributor address; City; State; Zip Code 4905 Valley Oak Dr. Austin, TX 78731	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 09/23/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romberger, Ann <hr/> Contributor address; City; State; Zip Code 41 Depot Road Leverett, MD 01054	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/12/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Nathan <hr/> Contributor address; City; State; Zip Code 7224 Brick Slope Path Austin, TX 78744	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Toi Inc.
Date 09/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Savage, Stella <hr/> Contributor address; City; State; Zip Code 1206 Maple Avenue Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Legislative professional		Employer (See Instructions) Texas Senate

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/14 Rpt: 14/24
2 FILER NAME Ellis, Paige		3 Filer ID
4 Date 07/16/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenkkan, Pete <hr/> 6 Contributor address; City; State; Zip Code 117 Laurel Lane Austin, TX 78705	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Graves Dougherty Hearon & Moody PC
Date 09/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Searl, Marjorie <hr/> Contributor address; City; State; Zip Code 124 Summit Drive Rochester, NY 14620	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/25/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverii, Ian <hr/> Contributor address; City; State; Zip Code 1718 S Cody St Lakewood, CO 80232	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Colorado House Majority Project
Date 09/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Glenn <hr/> Contributor address; City; State; Zip Code 1205 Kinney Unit A Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed
Date 09/25/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sotomayor, Tristen <hr/> Contributor address; City; State; Zip Code 18843 Jeffrey Ave. Cerritos, CA 90703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Southland Energy Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/14 Rpt: 15/24
2 FILER NAME Ellis, Paige		3 Filer ID
4 Date 09/25/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanford, Jason <hr/> 6 Contributor address; City; State; Zip Code 4510 West Guadalupe Street Austin, TX 78751	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SVP of Global Communications		9 Employer (See Instructions) Hill+Knowlton Strategies
Date 07/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Meter, Sonia <hr/> Contributor address; City; State; Zip Code 4510 W. Guadalupe St C-321 Austin, TX 78751	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Stanford Campaigns
Date 08/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Meter, Sonia <hr/> Contributor address; City; State; Zip Code 4510 W. Guadalupe St C-321 Austin, TX 78751	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Stanford Campaigns
Date 09/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Meter, Sonia <hr/> Contributor address; City; State; Zip Code 4510 W. Guadalupe St C-321 Austin, TX 78751	Amount of Contribution (\$) \$160.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Stanford Campaigns
Date 09/25/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vogas, Joseph <hr/> Contributor address; City; State; Zip Code 614 West Castle Harbour Friendswood, TX 77546	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Client Relations Team		Employer (See Instructions) Corrections Software Solutions

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/14 Rpt: 16/24
2 FILER NAME Ellis, Paige		3 Filer ID
4 Date 07/04/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Thomas <hr/> 6 Contributor address; City; State; Zip Code 2326 Webberville Road Austin, TX 78702	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/18/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Jay <hr/> Contributor address; City; State; Zip Code 507 Pressler St Apt 4133 Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/25/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggins, Laura <hr/> Contributor address; City; State; Zip Code 602 Fort Drum Drive Austin, TX 78745	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Interior Designer		Employer (See Instructions) PPDS
Date 09/25/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jon <hr/> Contributor address; City; State; Zip Code 338 Spear Street San Francisco, CA 94105	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) Sares Regis
Date 09/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lopez, christine <hr/> Contributor address; City; State; Zip Code 107 Amerson Ln San Antonio, TX 78213	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/14 Rpt: 17/24	
2 FILER NAME Ellis, Paige		3 Filer ID	
4 Date 07/29/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ocanas, gilberto		7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code 13805 panorama Drive Austin, TX 78732		
8 Principal occupation / Job title (See Instructions) Public Affairs Strategist		9 Employer (See Instructions) Ocanas Group	
Date 08/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ocanas, gilberto		Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 13805 panorama Drive Austin, TX 78732		
Principal occupation / Job title (See Instructions) Public Affairs Strategist		Employer (See Instructions) Ocanas Group	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/7 Rpt: 18/24		2 FILER NAME Ellis, Paige		3 Filer ID	
4 Date 07/10/2018		5 Payee name Act Blue			
6 Amount (\$) \$114.40		7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/11/2018		Payee name Act Blue			
Amount (\$) \$22.72		Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/09/2018		Payee name Act Blue			
Amount (\$) \$21.05		Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/7 Rpt: 19/24		2 FILER NAME Ellis, Paige		3 Filer ID	
4 Date 09/06/2018		5 Payee name Act Blue			
6 Amount (\$) \$11.07		7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees	
9 Complete ONLY if direct expenditure to benefit C/OH					
Date 07/05/2018		Candidate/Officeholder name Payee name ActBlue			
Amount (\$) \$75.12		Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees	
Complete ONLY if direct expenditure to benefit C/OH					
Date 08/03/2018		Candidate/Officeholder name Payee name ActBlue			
Amount (\$) \$6.79		Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees	
Complete ONLY if direct expenditure to benefit C/OH					
Candidate/Officeholder name Office sought Office held					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/7 Rpt: 20/24		2 FILER NAME Ellis, Paige		3 Filer ID	
4 Date 07/21/2018		5 Payee name Bumperactive			
6 Amount (\$) \$54.13		7 Payee address; City; State; Zip Code 5907 Burnet Rd Austin, TX 78757			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 07/19/2018		Payee name Chad Adams Photography			
Amount (\$) \$400.00		Payee address; City; State; Zip Code 1414 Tuffit Ln Austin, TX 78753			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/21/2018		Payee name City of Austin			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 301 W 2nd St Austin, TX 78701			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/7 Rpt: 21/24		2 FILER NAME Ellis, Paige		3 Filer ID	
4 Date 09/25/2018		5 Payee name Constant Contact			
6 Amount (\$) \$21.32		7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Advertising	
9 Complete ONLY if direct expenditure to benefit C/OH					
Date 09/07/2018		Candidate/Officeholder name Payee name Constant Contact			
Amount (\$) \$21.32		Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Advertising	
Complete ONLY if direct expenditure to benefit C/OH					
Date 07/24/2018		Candidate/Officeholder name Payee name Ellis, Paige			
Amount (\$) \$344.00		Payee address; City; State; Zip Code PO Box 160233 Austin, TX 78716			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Excessive loan refund	
Complete ONLY if direct expenditure to benefit C/OH					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/7 Rpt: 22/24		2 FILER NAME Ellis, Paige		3 Filer ID	
4 Date 08/27/2018		5 Payee name Jones, Marissa			
6 Amount (\$) \$300.00		7 Payee address; City; State; Zip Code 609 E 48th St. Austin, TX 78751			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 08/27/2018		Candidate/Officeholder name Paypal			
Amount (\$) \$3.50		Office sought 2211 North First Street San Jose, CA 95131			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 07/25/2018		Candidate/Officeholder name Texas Democratic party			
Amount (\$) \$775.00		Office sought 1106 Lavaca St #100 Austin, TX 78701			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter File Access	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate/Officeholder name Office sought Office held					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/7 Rpt: 23/24		2 FILER NAME Ellis, Paige		3 Filer ID
4 Date 07/30/2018		5 Payee name Walker, Brittne		
6 Amount (\$) \$225.00		7 Payee address; City; State; Zip Code 3014 W William Cannon #1628 Austin, TX 78745		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance Consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 09/23/2018		Payee name Whole Foods		
Amount (\$) \$152.18		Payee address; City; State; Zip Code 525 N Lamar Blvd Austin, TX 78703		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 09/11/2018		Payee name Wix		
Amount (\$) \$17.50		Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/7 Rpt: 24/24		2 FILER NAME Ellis, Paige		3 Filer ID	
4 Date 08/11/2018		5 Payee name Wix			
6 Amount (\$) \$17.50		7 Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 07/11/2018		Candidate/Officeholder name		Office sought	
Amount (\$) \$17.50		Payee name Wix			
		Payee address; City; State; Zip Code 2601 Mission Street San Francisco, CA 94110			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
		Candidate/Officeholder name		Office sought	
		Office held			