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	3 Filer ID (Ethics Commission Filers)
1	NO ON PROP J	

4 Date	5 Payee name
09/27/2018	DONATE WAY

6 Amount ($)	7 Payee address: City: State: Zip Code
28.91	AUSTIN TX

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	FEES	☐ Check if travel outside of Texas. Complete Schedule T ☐ 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	Payee name

Amount ($)	Payee address: City: State: Zip Code

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
		☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name

Amount ($)	Payee address: City: State: Zip Code

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
		☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 2

2 FILER NAME: NO ON PROP J

3 Filer ID (Ethics Commission Filers):

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS: $

5 Date	6 Full name of contributor ☐ out-of-state PAC (ID#) 7 Contributor address; City: State: Zip Code	8 Amount of Contribution $	9 In-kind contribution description
09/27/18	ENVIRONMENT TEXAS 200 E. 30TH AUSTIN TX 78705	116.28	COMMUNICATIONS

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

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date	Full name of contributor ☐ out-of-state PAC (ID#) Contributor address; City: State: Zip Code	Amount of Contribution $	In-kind contribution description

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

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 2

2 FILER NAME: NO ON PROP J

3 Filer ID (Ethics Commission Filers):

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS: $

5 Date	6 Full name of contributor ☐ out-of-state PAC (ID#) / 7 Contributor address; City; State; Zip Code	8 Amount of Contribution $	9 In-kind contribution description
09/14/2017	JOHN-MICHAEL CORTEZ 2401 MORENO AUSTIN TX 78723	187.00	PO BOX RENTAL ☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR NON-JUDICIAL) (See Instructions)
SPECIAL ASSISTANT	CITY OF AUSTIN
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of Contribution $	In-kind contribution description
09/14/2018	ANGELA DE HOYOS HART 4900 DRY CREEK AUSTIN TX 78749	62.25	DOMAIN REGISTRATION ☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employer (FOR NON-JUDICIAL) (See Instructions)
PROJECT MANAGER	GENERAL MOTORS
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	

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: 2

2 FILER NAME: NO ON PROP J

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor / out-of-state PAC (ID#)	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
2018/09/27	DICK KAUFMANN	2510 CEDARVIEW AUSTIN TX 78704	52.95

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

Date	Full name of contributor / out-of-state PAC (ID#)	Contributor address; City; State; Zip Code	Amount of contribution ($)
09/27/2018	PATRICK GOETZ	503 NECHES AUSTIN TX 78751	52.95

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#)	Contributor address; City; State; Zip Code	Amount of contribution ($)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#)	Contributor address; City; State; Zip Code	Amount of contribution ($)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 2

2 FILER NAME: NO ON PROP J

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor / 6 Contributor address: City, State, Zip Code	7 Amount of contribution ($)
09/19/2017	JOHN-MICHAEL CORTEZ 2401 MORENO STREET AUSTIN, TX 78723	100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
SPECIAL ASSISTANT	CITY OF AUSTIN

Date	Full name of contributor / Contributor address: City, State, Zip Code	Amount of contribution ($)
09/20/2017	MATTHEW BORAH 505 E MARY ST AUSTIN TX 78704	316.11

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
SENIOR COUNSEL	LOCKE LORD

Date	Full name of contributor / Contributor address: City, State, Zip Code	Amount of contribution ($)
09/20/2017	CHRIS WOJTEWICZ 8409 ADIRONDACK AUSTIN TX 78759	21.317

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / Contributor address: City, State, Zip Code	Amount of contribution ($)
09/21/2017	DAVID SULLIVAN 1710 WATERSTON AUSTIN TX 78703	104.53

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.

SUBTOTALS - SPAC

FORM SPAC
COVER SHEET PG 3

17 COMMITTEE NAME	18 Filer ID (Ethics Commission Filers)
NO ON PROP J	

19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1	☒	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 647.91
2	☒	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$ 365.53
3	☐	SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4	☐	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
5	☐	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
6	☐	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABOR ORGANIZATION	$
7	☐	SCHEDULE E: LOANS	$
8	☒	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 28.91
9	☐	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
10	☐	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$
11	☐	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$
12	☐	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$
13	☐	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$
14	☐	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME: No on Prop J

13 Filer ID (Ethics Commission Filers):

14 COMMITTEE PURPOSE

(Attach lists on plain paper to complete this report if necessary.)

- ☐ SUPPORT (Candidate or Measure)
- ☒ OPPOSE (Candidate or Measure)
- ☐ ASSIST (Officeholder)

- ☐ CANDIDATE
- ☐ OFFICEHOLDER
- ☒ MEASURE

CANDIDATE / OFFICEHOLDER NAME:

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder):

BALLOT IDENTIFICATION / #: Proposition J

ELECTION DATE (Month / Day / Year): 11/06/2018

DESCRIPTION:

15 CONTRIBUTION TOTALS

	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) UNLESS ITEMIZED	$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 1013.44
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS UNLESS ITEMIZED	$
	4. TOTAL POLITICAL EXPENDITURES	$ 28.91
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 619.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$

16 AFFIDAVIT

IVONNE SERRANO
Notary Public, State of Texas
Comm. Expires 09-06-2022
Notary ID 131712173

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Signature of Campaign Treasurer

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

Ivonne Serrano	Ivonne Serrano	Public Notary
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: 8

3 COMMITTEE NAME

No on Prop J

OFFICE USE ONLY

Date Received

OCC RECEIVED AT
OCT 9 '18 PM 4:51

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

4 COMMITTEE ADDRESS

☐ Change of Address

ADDRESS / PO BOX | APT / SUITE # | CITY | STATE | ZIP CODE

815A Brazos Street #175 | Austin | TX | 78701

5 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST | MI

	Angela	C

NICKNAME | LAST | SUFFIX

De Hoyos Hart

6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE) | APT / SUITE # | CITY | STATE | ZIP CODE

4900 Dry Oak Trail | Austin | TX | 78749

7 CAMPAIGN TREASURER MAILING ADDRESS

☐ Change of Address

STREET ADDRESS OR PO BOX | APT / SUITE # | CITY | STATE | ZIP CODE

8 CAMPAIGN TREASURER PHONE

AREA CODE | PHONE NUMBER | EXTENSION

(512) | 680-9389 |

9 REPORT TYPE

- ☐ January 15
- ☐ July 15
- ☒ 30th day before election
- ☐ 8th day before election
- ☐ Runoff
- ☐ Exceeded $500 limit
- ☐ Dissolution (Attach PAC-DR)
- ☐ 10th day after campaign treasurer termination

10 PERIOD COVERED

Month	Day	Year		Month	Day	Year
07	01	2018	THROUGH	09	27	2018

11 ELECTION

ELECTION DATE

Month	Day	Year
11	06	2018

ELECTION TYPE

- ☐ Primary
- ☐ Runoff
- ☐ Other Description
- ☒ General
- ☐ Special

GO TO PAGE 2