




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 (Ethics Commission Filers)	2 Total pages filed: <div style="text-align: center; font-size: 1.2em;">27</div>								
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Amit G		OFFICE USE ONLY Date Received <div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: 150px;"> OCC RECEIVED AT OCT 29 '18 PM2:35 </div> Date Hand-delivered or Date Postmarked <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; border-bottom: 1px solid black;">Receipt #</td> <td style="width:50%; border-bottom: 1px solid black;">Amount \$</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Date Processed</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Date Imaged</td> </tr> </table>	Receipt #	Amount \$	Date Processed		Date Imaged			
	Receipt #	Amount \$									
Date Processed											
Date Imaged											
NICKNAME LAST SUFFIX Motwani											
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 6840 Austin TX 78762											
<input type="checkbox"/> Change of Address											
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 850-4636										
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Angela C										
	NICKNAME LAST SUFFIX Salas										
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3419 Harpers Ferry Lane Austin TX 78745										
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 851-7965										
9 REPORT TYPE	<table style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input checked="" 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 type="checkbox"/> July 15	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Month Day Year</td> <td style="text-align: center;">THROUGH</td> <td style="text-align: center;">Month Day Year</td> </tr> <tr> <td style="text-align: center;">09 / 28 / 2018</td> <td></td> <td style="text-align: center;">10 / 27 / 2018</td> </tr> </table>			Month Day Year	THROUGH	Month Day Year	09 / 28 / 2018		10 / 27 / 2018		
Month Day Year	THROUGH	Month Day Year									
09 / 28 / 2018		10 / 27 / 2018									
11 ELECTION	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;"> ELECTION DATE Month Day Year 11 / 06 / 2018 </td> <td style="width:70%;"> ELECTION TYPE <table style="width:100%;"> <tr> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other Description</td> </tr> <tr> <td><input checked="" type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table> </td> </tr> </table>			ELECTION DATE Month Day Year 11 / 06 / 2018	ELECTION TYPE <table style="width:100%;"> <tr> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other Description</td> </tr> <tr> <td><input checked="" type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special	
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<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special										
12 OFFICE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;"> OFFICE HELD (if any) <div style="text-align: center; font-size: 1.2em;">N/A</div> </td> <td style="width:50%;"> 13 OFFICE SOUGHT (if known) <div style="text-align: center; font-size: 1.2em;">Austin City Council - District 3</div> </td> </tr> </table>			OFFICE HELD (if any) <div style="text-align: center; font-size: 1.2em;">N/A</div>	13 OFFICE SOUGHT (if known) <div style="text-align: center; font-size: 1.2em;">Austin City Council - District 3</div>						
OFFICE HELD (if any) <div style="text-align: center; font-size: 1.2em;">N/A</div>	13 OFFICE SOUGHT (if known) <div style="text-align: center; font-size: 1.2em;">Austin City Council - District 3</div>										

GO TO PAGE 2

FORM C/OH
COVER SHEET PG 2

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.	
<div style="border: 2px solid black; padding: 5px; display: inline-block;"><div style="display: flex; align-items: center; justify-content: center;"><div style="text-align: center;"><div style="margin-left: 10px;">ANGELA SALAS Notary Public, State of Texas Comm. Expires 05-26-2020 Notary ID 125422899</div></div></div></div>		<div style="text-align: right;"> _____ Signature of Candidate or Officeholder</div>	
AFFIX NOTARY STAMP / SEAL ABOVE			
Sworn to and subscribed before me, by the said <u>Amit Motwani</u> , this the <u>28th</u> day of <u>October</u> , 20 <u>18</u> , to certify which, witness my hand and seal of office.			
 _____ Signature of officer administering oath		<u>ANGELA SALAS</u> _____ Printed name of officer administering oath	
		<u>NOTARY</u> _____ Title of officer administering oath	

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

19 FILER NAME Motwani, Amit		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 9,706.00
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 MADE FROM POLITICAL CONTRIBUTIONS	\$ 8,341.29
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 type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
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: 16
2 FILER NAME Amit Motwani		3 Filer ID (Ethics Commission Filers)
4 Date 09/28/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mamta Accapadi 6 Contributor address; City; State; Zip Code 4040 Oak St. Orlando, FL 32814	7 Amount of contribution (\$) 350.00
8 Principal occupation / Job title (See Instructions) Administrator		9 Employer (See Instructions) University
Date 09/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sue Carpenter Contributor address; City; State; Zip Code 2104 Tom Miller Street	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions) CPO		Employer (See Instructions) UWATX
Date 09/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy Silvey Contributor address; City; State; Zip Code 17405 Toyahville, Round Rock, Texas 78664	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions) Capital Idea
Date 09/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karen Green Contributor address; City; State; Zip Code 10202 Shinnecock Hills Drive, Austin, TX 78747	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Family Literacy Manager		Employer (See Instructions) El Buen Samaritano
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:

16

2 FILER NAME

Amit Motwani

3 Filer ID (Ethics Commission Filers)

4 Date

09/28/2018

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Shilpa Hegde

7 Amount of contribution (\$)

700.00

6 Contributor address;

City; State; Zip Code

9865 Clancy Drive, Frisco, TX 75035

8 Principal occupation / Job title (See Instructions)

Housewife

9 Employer (See Instructions)

Housewife

Date

09/28/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Pankti Patel

Amount of contribution (\$)

11.00

Contributor address;

City; State; Zip Code

1219 Lynn Lane, Humble, TX 77338

Principal occupation / Job title (See Instructions)

Lawyer

Employer (See Instructions)

Law Firm

Date

09/28/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Viviana Rubinstein

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

6609 Valleside Road, Austin, TX 78731

Principal occupation / Job title (See Instructions)

Lead Appraiser

Employer (See Instructions)

Liveware, Inc.

Date

09/28/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Shradha Motwani

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

3130 Sawtelle Blvd, #201 Los Angeles, CA 90066

Principal occupation / Job title (See Instructions)

Marketing

Employer (See Instructions)

Match

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:

16

2 FILER NAME

Amit Motwani

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

09/28/2018

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Marissa Vasquez

7 Amount of contribution (\$)

20.00

6 Contributor address; City; State; Zip Code

1207 Hollow Creek Dr #1 Austin, TX 78704

8 Principal occupation / Job title (See Instructions)

Prevention Supervisor

9 Employer (See Instructions)

Phoenix House

Date

09/28/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Erika McDonald

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

7010 Stafforshire St, #139, Houston, TX 77030

Principal occupation / Job title (See Instructions)

Student

Employer (See Instructions)

University of Houston

Date

09/29/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robert Ochoa

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

10 Nashua St #1, Somerville, MA 02145

Principal occupation / Job title (See Instructions)

Teacher

Employer (See Instructions)

Dearborn Academy

Date

09/29/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Andy Sadhwani

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

3947 W 119th St, Hawthorne, CA 90250

Principal occupation / Job title (See Instructions)

Analyst

Employer (See Instructions)

Self

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: 16
2 FILER NAME Amit Motwani		3 Filer ID (Ethics Commission Filers)
4 Date 09/29/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jared Caplan 6 Contributor address; City; State; Zip Code 4533 Evergreen, Bellaire, TX 77401	7 Amount of contribution (\$) 350.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Bradley
Date 09/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sangeet Motwani Contributor address; City; State; Zip Code 3616 Bristol Motor Pass, Austin, TX 78728	Amount of contribution (\$) 10.00
Principal occupation / Job title (See Instructions) Data Analytics		Employer (See Instructions) Conduent
Date 09/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosh Adnani Contributor address; City; State; Zip Code 7538 NE 201st Pl, Kenmore, WA 98028	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 09/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martha Parodi Contributor address; City; State; Zip Code 2410 Aspen Meadow Rd, Leander, TX 78641	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) FFM Manager		Employer (See Instructions) FirstCare
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:

16

2 FILER NAME

Amit Motwani

3 Filer ID (Ethics Commission Filers)

4 Date

09/29/2018

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tom Kamrath

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

PO Box 2922, Wimberley, TX 79676

8 Principal occupation / Job title (See Instructions)

N/A

9 Employer (See Instructions)

N/A

Date

09/29/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mike Roseberry

Amount of contribution (\$)

350.00

Contributor address;

City; State; Zip Code

4603 Englewood Dr, Austin, TX 78745

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

N/A

Date

09/29/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Priyanka Patneedi

Amount of contribution (\$)

350.00

Contributor address;

City; State; Zip Code

1485 Macdonald St, Redwood City, CA 94061

Principal occupation / Job title (See Instructions)

Pharmacist

Employer (See Instructions)

Stanford Health Care

Date

09/29/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Harrish Kotecha

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

3803 Winchester Dr, Cedar Park, TX 78613

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

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: 16
2 FILER NAME Amit Motwani		3 Filer ID (Ethics Commission Filers)
4 Date 09/29/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chante Dennis 6 Contributor address; City; State; Zip Code 4517 Trinity Woods St, Leander, TX 78641	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Dennis Steel
Date 09/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ursula Urdiales Contributor address; City; State; Zip Code 9898 Colonnade Blvd, #8305, San Antonio, TX 78230	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions) Sr Data Analyst		Employer (See Instructions) Accenture Federal Services
Date 09/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mandie Sanchez Contributor address; City; State; Zip Code 30 Woodland Ln, Round Rock, TX 78664	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Farm Credit Bank of Texas
Date 09/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rachel Krueger Contributor address; City; State; Zip Code 6024 Tributary Ridge Dr, Austin, TX 78759	Amount of contribution (\$) 30.00
Principal occupation / Job title (See Instructions) Housewife		Employer (See Instructions) N/A
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: 16**2** FILER NAME

Amit Motwani

3 Filer ID (Ethics Commission Filers)**4** Date
09/30/2018**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Ruby Deol

7 Amount of contribution (\$) 350.00**6** Contributor address; City; State; Zip Code

640 Memorial Hill, Murphy, TX 75094

8 Principal occupation / Job title (See Instructions)
Consultant**9** Employer (See Instructions)
SelfDate
09/30/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Imran Mushtaq

Amount of contribution (\$) 100.00

Contributor address; City; State; Zip Code

4600 Camacho Street, Austin, TX 78723

Principal occupation / Job title (See Instructions)
Cyber SecurityEmployer (See Instructions)
DellDate
09/30/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Vamshi Gannarapur

Amount of contribution (\$) 200.00

Contributor address; City; State; Zip Code

La Frontera Blvd, Austin, TX 78728

Principal occupation / Job title (See Instructions)
EngineerEmployer (See Instructions)
DellDate
09/30/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Derrick Bonyuet

Amount of contribution (\$) 100.00

Contributor address; City; State; Zip Code

14812 Haley Hollow, Austin, TX 78728

Principal occupation / Job title (See Instructions)
Financial AnalystEmployer (See Instructions)
Dell**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: 16
2 FILER NAME Amit Motwani		3 Filer ID (Ethics Commission Filers)
4 Date 09/30/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sona Shah 6 Contributor address; City; State; Zip Code 1201 Grove Blvd, #903, Austin, TX 78741	7 Amount of contribution (\$) 30.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) City of Austin
Date 09/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumit Bhasin Contributor address; City; State; Zip Code 311 Bowie Street, #1512, Austin, TX 78703	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Breadcrumbs
Date 09/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maria Hernandez Contributor address; City; State; Zip Code 1503 Garner Ave, Austin, TX 78704	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Nonprofit Professional		Employer (See Instructions) Vela
Date 09/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kashan Shami Contributor address; City; State; Zip Code 5539 Starfire Cir, Freemont, CA 94538	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Recruiter		Employer (See Instructions) Facebook
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: 16**2** FILER NAME

Amit Motwani

3 Filer ID (Ethics Commission Filers)**4** Date
09/30/2018**5** Full name of contributor ☐ out-of-state PAC (ID#: _____)

Sunny Patneedi

7 Amount of contribution (\$) 200.00**6** Contributor address; City; State; Zip Code

1485 Macdonald St, Austin, TX 78754

8 Principal occupation / Job title (See Instructions)
Software Engineer**9** Employer (See Instructions)
AppleDate
09/30/2018Full name of contributor ☐ out-of-state PAC (ID#: _____)

Jay Motwani

Amount of contribution (\$) 350.00

Contributor address; City; State; Zip Code

11324 Wet Season Dr, Austin, TX 78754

Principal occupation / Job title (See Instructions)
VolusionEmployer (See Instructions)
VPDate
10/01/2018Full name of contributor ☐ out-of-state PAC (ID#: _____)

Abraham Leija

Amount of contribution (\$) 200.00

Contributor address; City; State; Zip Code

3305 Hidalgo St, Austin, TX 78702

Principal occupation / Job title (See Instructions)
Graciela Leija MD PAEmployer (See Instructions)
AdministratorDate
10/01/2018Full name of contributor ☐ out-of-state PAC (ID#: _____)

Kit Sarai

Amount of contribution (\$) 700.00

Contributor address; City; State; Zip Code

5600 Bowery Trail, Austin, TX 78753

Principal occupation / Job title (See Instructions)
ConsultantEmployer (See Instructions)
Self**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:

16

2 FILER NAME

Amit Motwani

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

10/01/2018

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Evan Lambert

7 Amount of contribution (\$)

50.00

6 Contributor address; City; State; Zip Code

403 Wilmes Dr, Austin, TX 78752

8 Principal occupation / Job title (See Instructions)

Finance

9 Employer (See Instructions)

United Way

Date

10/01/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carolina Velez

Amount of contribution (\$)

350.00

Contributor address; City; State; Zip Code

2204 East Side Drive, Austin, TX 78704

Principal occupation / Job title (See Instructions)

Healthcare

Employer (See Instructions)

AEC

Date

10/01/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Graciela Leija

Amount of contribution (\$)

200.00

Contributor address; City; State; Zip Code

1800 Woodland Ave, Austin, TX 78741

Principal occupation / Job title (See Instructions)

MD

Employer (See Instructions)

Self

Date

10/01/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Santosh Daryani

Amount of contribution (\$)

25.00

Contributor address; City; State; Zip Code

9509 Lisi Anne Dr, Austin, TX 78717

Principal occupation / Job title (See Instructions)

N/A

Employer (See Instructions)

N/A

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:

16

2 FILER NAME

Amit Motwani

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

10/01/2018

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Travis Bias

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

413A 61st St, Oakland, CA 94609

8 Principal occupation / Job title (See Instructions)

Physician

9 Employer (See Instructions)

Sutter Health

Date

10/01/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gul Motwani

Amount of contribution (\$)

700.00

Contributor address;

City; State; Zip Code

8031 Big Oak Trail Dr, Houston, TX 77040

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date

10/01/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jorge Salas

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

3419 Harpers Ferry Lane, Austin, TX 78745

Principal occupation / Job title (See Instructions)

Supervisor

Employer (See Instructions)

LML Solution

Date

10/01/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tathiana Caballero

Amount of contribution (\$)

10.00

Contributor address;

City; State; Zip Code

1722 Westmeadow Trail, Round Rock, TX 78666

Principal occupation / Job title (See Instructions)

Teacher

Employer (See Instructions)

Primrose

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:

16

2 FILER NAME

Amit Motwani

3 Filer ID (Ethics Commission Filers)

4 Date

10/11/2018

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Veena Sankar

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

3006 Pearce Road, Austin, TX 78730

8 Principal occupation / Job title (See Instructions)

Physician

9 Employer (See Instructions)

AAG

Date

10/12/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Vincent Amore

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1800 E. 4th Street, Unit 269, Austin, TX 78702

Principal occupation / Job title (See Instructions)

Developer/Builder

Employer (See Instructions)

Retired

Date

10/13/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Hudson Baird

Amount of contribution (\$)

30.00

Contributor address;

City; State; Zip Code

2405 Coronado St. Austin, TX 78702

Principal occupation / Job title (See Instructions)

Executive Director

Employer (See Instructions)

PelotonU

Date

10/14/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Heather Alden

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1019 E. Riverside Dr. #2, Austin, TX 78704

Principal occupation / Job title (See Instructions)

Executive Director

Employer (See Instructions)

Sims Foundation

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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: 16
2 FILER NAME Amit Motwani		3 Filer ID (Ethics Commission Filers)
4 Date 10/15/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William McKerley 6 Contributor address; City; State; Zip Code 1027 Arthur Stiles Rd, Austin, TX 78721	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self
Date 10/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arvind Raman Contributor address; City; State; Zip Code 7612 Mifflin Kennedy Terrace, Austin, TX 78749	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Intel
Date 10/19/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sameer Shah Contributor address; City; State; Zip Code 8716 Little Laura Drive, Austin, TX 78757	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Marketer		Employer (See Instructions)
Date 10/19/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paulina Bermeo Contributor address; City; State; Zip Code 5804 Breezewood Dr, Austin, TX 78745	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Yoga/Spanish Instructor		Employer (See Instructions) Self
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:

16

2 FILER NAME

Amit Motwani

3 Filer ID (Ethics Commission Filers)

4 Date

10/21/2018

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kevin Page

7 Amount of contribution (\$)

350.00

6 Contributor address;

City; State; Zip Code

9116 Vista Creek Dr, Dallas, TX 75243

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Feds

Date

10/21/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Heather Alden

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

1019 E. Riverside Dr. #2, Austin, TX 78704

Principal occupation / Job title (See Instructions)

Executive Director

Employer (See Instructions)

Sims Foundation

Date

10/22/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Shruti Anand

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

10810 Centennial Trail, Austin, TX 78726

Principal occupation / Job title (See Instructions)

Engineer

Employer (See Instructions)

Dassault Systems

Date

10/25/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Edie Cassell

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

1611 Willow Drive, Austin, TX 78702

Principal occupation / Job title (See Instructions)

Clinical Assistant Professor

Employer (See Instructions)

Texas A&M

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: 16
2 FILER NAME Amit Motwani		3 Filer ID (Ethics Commission Filers)
4 Date 10/26/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tania Shahani 6 Contributor address; City; State; Zip Code 936 Dunlap St, Santa Fe, NM 87501	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) State of New Mexico
Date 10/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cynthia Ann Morales Contributor address; City; State; Zip Code 1106 Peyton Place, Austin, TX 78613	Amount of contribution (\$) 40.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) State of Texas
Date 10/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prakash Mohandas Contributor address; City; State; Zip Code 700 Castle Ridge Rd, Apt A, Austin, TX 78746	Amount of contribution (\$) 350.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Charles Schwab
Date 10/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim Byerlotzer Contributor address; City; State; Zip Code 2100 Willow Drive, Austin, TX 78702	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
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:

16

2 FILER NAME

Amit Motwani

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

10/27/2018

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Edie Cassell

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

1611 Willow St, Austin, TX 78702

8 Principal occupation / Job title (See Instructions)

Clinical Assistant Professor

9 Employer (See Instructions)

Texas A&M

Date

10/27/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amy Thompson

Amount of contribution (\$)

5.00

Contributor address;

City; State; Zip Code

1402 E. 2nd Street, Austin, TX 78702

Principal occupation / Job title (See Instructions)

Graduate Teaching Assistant

Employer (See Instructions)

University of Texas

Date

10/27/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Buddy Bayer

Amount of contribution (\$)

45.00

Contributor address;

City; State; Zip Code

1212 Garden St, Austin, TX 78702

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

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.

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: 8
2 FILER NAME
Amit Motwani
3 Filer ID (Ethics Commission Filers)

4 Date
09/30/2018
5 Payee name
Facebook

6 Amount (\$)
32.91
7 Payee address; City; State; Zip Code
1 Hacker Way, Melo Park, CA 94025

8
PURPOSE OF EXPENDITURE
(a) Category (See Categories listed at the top of this schedule)
Fees
(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

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

Date
10/01/2018
Payee name
Super Cheap Signs

Amount (\$)
264.13
Payee address; City; State; Zip Code
9200 Waterford Centre, Suite 100, Austin, TX 78758

PURPOSE OF EXPENDITURE
Category (See Categories listed at the top of this schedule)
Advertising Expense
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
10/02/2018
Payee name
Donorbox

Amount (\$)
68.51
Payee address; City; State; Zip Code
1885 Mission St, San Francisco, CA 94103

PURPOSE OF EXPENDITURE
Category (See Categories listed at the top of this schedule)
Fees
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

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: 8		2 FILER NAME Amit Motwani		3 Filer ID (Ethics Commission Filers)	
4 Date 10/04/2018		5 Payee name 24HourWristbands.Com			
6 Amount (\$) 189.37		7 Payee address; City; State; Zip Code 14550 Beechnut St, Houston, TX 77083			
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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 10/05/2018		Payee name Texas Democratic Party			
Amount (\$) 550.00		Payee address; City; State; Zip Code 1106 Lavaca Street, Suite 100, Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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	
Date 10/06/2018		Payee name HEB 428			
Amount (\$) 28.56		Payee address; City; State; Zip Code 6900 Brodie Lane, Austin, TX 78745			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beberages Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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	

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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: 8		2 FILER NAME Amit Motwani		3 Filer ID (Ethics Commission Filers)	
4 Date 10/06/2018		5 Payee name Wal-Mart 2133			
6 Amount (\$) 22.54		7 Payee address; City; State; Zip Code 5017 W Highway 290, Austin, TX 78735			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Bevs 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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/07/2018		Payee name Taco Cabana 20129			
Amount (\$) 60.58		Payee address; City; State; Zip Code 2507 E. Riverside Drive, Austin, TX 78741			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Bevs Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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 10/07/2018		Payee name Taqueria Chapala Jalisco			
Amount (\$) 89.73		Payee address; City; State; Zip Code 2101 E. Cesar Chavez St, Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Bevs Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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 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: 8		2 FILER NAME Amit Motwani		3 Filer ID (Ethics Commission Filers)	
4 Date 10/07/2018		5 Payee name Vargas Market			
6 Amount (\$) 16.01		7 Payee address; City; State; Zip Code 810 Vargas Road, Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Bevs 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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 10/14/2018		Payee name Texas Coffee Traders			
Amount (\$) 30.81		Payee address; City; State; Zip Code 1400 E. 4th Street, Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Bevs Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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	
Date 10/15/2018		Payee name Casa Colombia			
Amount (\$) 180.82		Payee address; City; State; Zip Code 2409 E. 7th Street, Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Bevs Exp		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: 8	2 FILER NAME Amit Motwani	3 Filer ID (Ethics Commission Filers)
4 Date 10/16/2018	5 Payee name Triaz Digital Printing, LLC	
6 Amount (\$) 361.28	7 Payee address; City; State; Zip Code 2433 Rutland Dr, Austin, TX 78758	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 10/16/2018	Payee name Facebook	
Amount (\$) 50.00	Payee address; City; State; Zip Code 1 Hacker Way, Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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 10/19/2018	Payee name Triaz Digital Printing, LLC	
Amount (\$) 3541.80	Payee address; City; State; Zip Code 2433 Rutland Dr, Austin, TX 78758	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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 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: 8		2 FILER NAME Amit Motwani		3 Filer ID (Ethics Commission Filers)	
4 Date 10/19/2018		5 Payee name Dan's Hamburgers			
6 Amount (\$) 29.63		7 Payee address; City; State; Zip Code 844 Airport Blvd, Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Bevs 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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 10/22/2018		Payee name Facebook			
Amount (\$) 250.00		Payee address; City; State; Zip Code 1 Hacker Way, Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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	
Date 10/23/2018		Payee name Squarespace, Inc.			
Amount (\$) 28.15		Payee address; City; State; Zip Code 225 Varick Street, New York, NY 10014			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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	

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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: 8		2 FILER NAME Amit Motwani		3 Filer ID (Ethics Commission Filers)	
4 Date 10/23/2018		5 Payee name Super Cheap Signs			
6 Amount (\$) 1060.69		7 Payee address; City; State; Zip Code 9200 Waterford Centre, Ste 100, Austin, TX 78758			
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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 10/25/2018		Payee name Super Cheap Signs			
Amount (\$) 285.78		Payee address; City; State; Zip Code 9200 Waterford Centre, Ste 100, Austin, TX 78758			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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	
Date 10/26/2018		Payee name Facebook			
Amount (\$) 750.00		Payee address; City; State; Zip Code 1 Hacker Way, Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: 8	2 FILER NAME Amit Motwani	3 Filer ID (Ethics Commission Filers)
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4 Date 10/27/2018	5 Payee name Southside Printing Service
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6 Amount (\$) 235.45	7 Payee address; City; State; Zip Code 3005 South Lamar, Ste B100, Austin, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/27/2018	Payee name Georgia Malone
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Amount (\$) 50.00	Payee address; City; State; Zip Code 1811 Forestglade, Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/27/2018	Payee name Zoticus
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Amount (\$) 164.54	Payee address; City; State; Zip Code 5501 Balcones Drive, Austin, TX 78731
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED