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: 15

3 COMMITTEE NAME: No on Prop J

OFFICE USE ONLY

Date Received: OCC RECEIVED A OCT 30 '18 AM 8:48

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 St #175 Austin, TX 78701

5 CAMPAIGN TREASURER NAME
MS / MRS / MR; FIRST: ANGELA; MI: C
NICKNAME; LAST: De Hoyos Hiatt; SUFFIX

6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE: 9900 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: 09 / 28 / 2018 THROUGH 10 / 28 / 2018

11 ELECTION
ELECTION DATE — Month / Day / Year: 11 / 06 / 2018
ELECTION TYPE
☐ Primary ☐ Runoff ☐ Other Description
☒ General ☐ Special

GO TO PAGE 2

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: LAND DEVELOPMENT CODE

15 CONTRIBUTION TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 0
2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 18,230.77

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 30.00
4.	TOTAL POLITICAL EXPENDITURES	$ 6383.17

CONTRIBUTION BALANCE

5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 12,345.19

OUTSTANDING LOAN TOTALS

6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 500

16 AFFIDAVIT

ALEJANDRO MEDINA
Notary Public, State of Texas
Comm. Expires 08-15-2022
Notary ID 131684514

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 Angela De Hoyos Hart, this the 30th day of October, 2018, to certify which, witness my hand and seal of office.

Signature of officer administering oath — Alejandro Medina, Printed name of officer administering oath — Notary, Title of officer administering oath

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	$ 17,334.36
2.	☒	SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$ 896.41
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	$ 1000.00
8.	☒	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 6353.17
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	$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 17

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 ($)
10/01/18	WITTSTRUCK, BRENDAN	4609 PARKWOOD AUSTIN TX 78722	150.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
URBAN PLANNER	ASAKURA ROBINSON

Date	Full name of contributor / out-of-state PAC (ID#)	Contributor address; City; State; Zip Code	Amount of contribution ($)
10/08/18	JOHN-MICHAEL CORTEZ	2401 MORENO ST AUSTIN TX 78723	5.58

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

Date	Full name of contributor / out-of-state PAC (ID#)	Contributor address; City; State; Zip Code	Amount of contribution ($)
10/10/18	JAY CROSSLEY	1010 ROMERIA #B AUSTIN TX 78757	52.95

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
NON-PROFIT	FAIRM & CITY

Date	Full name of contributor / out-of-state PAC (ID#)	Contributor address; City; State; Zip Code	Amount of contribution ($)
10/10/18	CONNOR KENNY	2215 BRUNSWICK DR AUSTIN TX 78723	26.63

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
INNOVATION STRATEGIST	OFFICE OF THE GOVERNOR

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: 17

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 ($)
10/10/18	TIM THOMAS 3403 SANTA MONICA AUSTIN TX 78741	52.95

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
SOFTWARE Developer	UNITY TECHNOLOGY

Date	Full name of contributor ☐ out-of-state PAC (ID#:) Contributor address; City; State; Zip Code	Amount of contribution ($)
10/10/18	TIMOTHY BRAY 4801 PLACID PLACE AUSTIN TX 78731	26.63

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:) Contributor address; City; State; Zip Code	Amount of contribution ($)
10/10/18	GREG ANDERSON 2235 E 6TH ST #301 AUSTIN TX 78702	500.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
AFFORDABLE HOUSING	HABITAT FOR HUMANITY

Date	Full name of contributor ☐ out-of-state PAC (ID#:) Contributor address; City; State; Zip Code	Amount of contribution ($)
10/11/18	MARY PUSTEJOVSKY 7325 WOLVERINE ST AUSTIN TX 78757	158.21

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
PRODUCT MANAGER	SALESFORCE

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 Filer(s))

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:)	7 Amount of contribution ($)
10/12/18	TODD HEMINGSON 6 Contributor address; City; State; Zip Code 3900 JEFFERSON ST AUSTIN TX 78731	26.63

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
10/16/18	PETE GILCREASE Contributor address; City; State; Zip Code 1038 E 48TH ST AUSTIN TX 78751	26.63

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RENTAL PROPERTY OWNER	SELF

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
10/17/18	PATRICIA SCHAMB Contributor address; City; State; Zip Code 2003 E 2ND ST AUSTIN TX 78702	10.84

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
OWNER	FIREFLY PEDICABS

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
10/18/18	LORENZO SADUN Contributor address; City; State; Zip Code 1706 W. 30TH AUSTIN TX 78703	30.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
MATHEMATICIAN	UT-AUSTIN

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: 7

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#:)	7 Amount of contribution ($)
10/18/18	MATTHEW ARMSTRONG 6 Contributor address; City; State; Zip Code 2004 HARDY CIRCLE AUSTIN TX 78757	26.63

8 Principal occupation / Job title (See Instructions): SALES

9 Employer (See Instructions): DBOX

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
10/19/18	KEVIN McLAUGHLIN Contributor address; City; State; Zip Code 800 W 38TH ST AUSTIN TX 78705	26.63

Principal occupation / Job title (See Instructions): ENGINEER

Employer (See Instructions): VAULT

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
10/25/18	CAROL LUGO Contributor address; City; State; Zip Code 809 W. ELIZABETH AUSTIN TX 78704	26.63

Principal occupation / Job title (See Instructions): SELF

Employer (See Instructions): SELF

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
10/27/18	BRIAN ANDREW LEVACK Contributor address; City; State; Zip Code 4206 WILDWOOD AUSTIN TX 78722	52.95

Principal occupation / Job title (See Instructions): PROGRAM OFFICER

Employer (See Instructions): SDF

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 A: 7

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#:)	7 Amount of contribution ($)
10/28/18	NORA MULLANEY MILLER 6 Contributor address; City; State; Zip Code: 2411 W 8TH AUSTIN TX 78703	26.63

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
10/28/18	GREGORY MADAN Contributor address; City; State; Zip Code: 2000 WHITIS AVE #210 AUSTIN TX 78705	26.63

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
EDITOR	OHLINGER STUDIOS

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
10/28/17	SABINO RENTERIA Contributor address; City; State; Zip Code: 1511 HASKELL AUSTIN TX 78702	26.63

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
COUNCIL MEMBER	CITY OF AUSTIN

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
10/28/18	RICHARD SCHEEMAN Contributor address; City; State; Zip Code: 2000 GARDEN STREET AUSTIN TX 78702	52.95

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

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: 7

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 ($)
10/28/18	BRIAN POTEET 12200 EASY WIND #3054 AUSTIN TX 78752	2663

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

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)
10/16/18	CARY FERCHILL 2524 TANGLEWOOD TR AUSTIN TX 78703	500.00

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

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)
10/16/18	MARK YZAGA 2401 BRIARGROVE AUSTIN TX 78704	475.00

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

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)
10/19/18	AUSTIN CHAMBER OF COMMERCE 535 EAST 5TH AUSTIN TX 78701	5,000.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
COMMERCE	AUSTIN CHAMBER

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: 7
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 ($)
10/22/18	RECA - BUSINESS M/PAC / 98 SAN JACINTO STE#510 AUSTIN TX 78701	10,000
8 Principal occupation / Job title (See Instructions): REAL ESTATE	9 Employer (See Instructions): RECA	

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)	

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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 1

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#:)	8 Amount of Contribution $	9 In-kind contribution description
10/28/18	Environment Texas 7 Contributor address: 200 E 30th City: Austin State: TX Zip Code: 78705	896.41	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#:)	Amount of Contribution $	In-kind contribution description
	Contributor address: City: State: Zip Code		☐ 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.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E: 1

2 FILER NAME: NO ON PROP J

3 Filer ID (Ethics Commission Filers):

4 TOTAL OF UNITEMIZED LOANS: $

5 Date of loan: 10/04/18

7 Name of lender: JOHN-MICHAEL CORTEZ ☐ out-of-state PAC (ID# _____)

9 Loan Amount ($): 1,000

6 Is lender a financial institution? Y (N)

8 Lender address; City; State; Zip Code: 2401 MORENO ST AUSTIN TX 78723

10 Interest rate: 0

11 Maturity date: N/A

12 Principal occupation / Job title (See Instructions): SPECIAL ASST

13 Employer (See Instructions): CITY OF AUSTIN

14 Description of Collateral ☒ none

15 Check if personal funds were deposited into political account (See Instructions) ☐

16 GUARANTOR INFORMATION ☒ not applicable

17 Name of guarantor:

18 Guarantor address; City; State; Zip Code:

19 Amount Guaranteed ($):

20 Principal Occupation (See Instructions):

21 Employer (See Instructions):

Date of loan:

Name of lender ☐ out of state PAC (ID# _____)

Loan Amount ($):

Is lender a financial institution? Y N

Lender address; City; State; Zip Code:

Interest rate:

Maturity date:

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Description of Collateral ☐ none

Check if personal funds were deposited into political account (See Instructions) ☐

GUARANTOR INFORMATION ☐ not applicable

Name of guarantor:

Guarantor address; City; State; Zip Code:

Amount Guaranteed ($):

Principal Occupation (See Instructions):

Employer (See Instructions):

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3	2 FILER NAME: NO ON PROP J	3 Filer ID (Ethics Commission Filers)

Expenditure 1

4 Date: 10/10/18	5 Payee name: AUSTIN CHRONICLE	
6 Amount ($): 1,545	7 Payee address; City; State; Zip Code: 4000 N IH35 AUSTIN TX 78751	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule): ADVERTISING EXPENSE	(b) Description: ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense. PRINT AD
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Expenditure 2

Date: 10/11/18	Payee name: CONSTANT CONTACT	
Amount ($): 21.32	Payee address; City; State; Zip Code: 1601 TRAPELO ROAD WALTHAM, MA 02451	
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. EMAIL MANAGEMENT
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Expenditure 3

Date: 10/15/18	Payee name: FACEBOOK	
Amount ($): 75.00	Payee address; City; State; Zip Code: 1 HACKER WAY MENLO PARK, CA	
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. ONLINE ADS
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	2 FILER NAME	3 Filer ID (Ethics Commission File(s))
3	NO ON PROP J	

Expenditure 1

4 Date	5 Payee name
10/19/18	AUSTIN CHRONICLE

6 Amount ($)	7 Payee address; City; State; Zip Code
1545	4000 N IH 35 AUSTIN TX 78751

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

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

Expenditure 2

Date	Payee name
10/23/18	JOHN-MICHAEL ORTEZ

Amount ($)	Payee address; City; State; Zip Code
500	2401 MORENO ST AUSTIN TX 78723

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

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

Expenditure 3

Date	Payee name
10/24/18	PROGRAPHIX

Amount ($)	Payee address; City; State; Zip Code
2592.59	8017 STARK STREET AUSTIN TX 78756

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

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: 3	2 FILER NAME NO ON PROP J	3 Filer ID (Ethics Commission Filers)
4 Date 10/28/18	5 Payee name DONATE WAY	
6 Amount ($) 74.26	7 Payee address; City; State; Zip Code AUSTIN TX	
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 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