

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID		2 Total pages filed: 35	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>MS</b>	FIRST Laura	MI	OFFICE USE ONLY Date Received	
	NICKNAME	LAST Morrison	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 3906 Bailey Lane  Austin, TX 78756			ZIP CODE	
	Date Hand-delivered or Date Postmarked			Receipt #	
	Amount			Date Processed	
	Date Imaged				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR <b>MR</b>	FIRST Steven	MI		
	NICKNAME	LAST Berch	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>4108 Burnet Road Austin TX 78756</b>				
7 CAMPAIGN TREASURER PHONE	AREA CODE <b>512</b>	PHONE NUMBER EXTENSION <b>608-5546</b>			
8 REPORT TYPE	<input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year    Month Day Year <b>10/28/2018</b> THROUGH <b>12/31/2018</b>				
10 ELECTION	ELECTION DATE Month Day Year <b>11/06/2018</b>		ELECTION TYPE		
	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special				
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Austin Mayor		

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

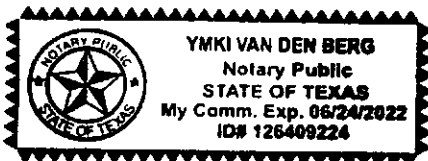
FORM C/OH  
COVER SHEET PG 2

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13 C / OH NAME Morrison, Laura		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC		
	COMMITTEE CAMPAIGN TREASURER NAME		
COMMITTEE CAMPAIGN TREASURER ADDRESS			
16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	521.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	5,950.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	43,002.31
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	5,036.70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	48,000.00

## 17 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.



Laura Morrison  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Laura Morrison, this the 14<sup>th</sup> day of January, 2019, to certify which, witness my hand and seal of office.

[Signature]  
Signature of officer administering

YmkI vanden Berg  
Printed name of officer administering

Notary Public  
Title of officer administering oath

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

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<b>18 FILER NAME</b> Morrison, Laura		<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,826.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 124.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 20,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 42,861.23
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 70.54
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 70.54
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 287.41

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/10 Rpt: 4/35
<b>2</b> FILER NAME Morrison, Laura		<b>3</b> Filer ID
<b>4</b> Date 11/02/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Robin <hr/> <b>6</b> Contributor address; City; State; Zip Code 721 Hilldale Ave  Berkeley, CA 94708	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
<b>Date</b> 10/28/2018	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartz, Joan <hr/> <b>Contributor address; City; State; Zip Code</b> 6713 Tulsa Cv  Austin, TX 78723	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 11/12/2018	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Bird, Sarah <hr/> <b>Contributor address; City; State; Zip Code</b> 6102 Mountainclimb Dr  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b> Novelist		<b>Employer (See Instructions)</b> Self
<b>Date</b> 11/02/2018	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Sharon <hr/> <b>Contributor address; City; State; Zip Code</b> 4213 Avenue F  Austin, TX 78751	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 11/01/2018	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadenhead, Don <hr/> <b>Contributor address; City; State; Zip Code</b> 1096 Verbena Dr  Austin, TX 78750	<b>Amount of Contribution (\$)</b>  \$35.00
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/10 Rpt: 5/35
<b>2</b> FILER NAME Morrison, Laura		<b>3</b> Filer ID
<b>4</b> Date 11/06/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chadwick, Paul <hr/> <b>6</b> Contributor address; City; State; Zip Code 1630 Wells Branch Parkway  Austin, TX 78728	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffey, Mark <hr/> Contributor address; City; State; Zip Code 806 W Gibson St  Austin, TX 78704	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Media Editor		Employer (See Instructions) Self
Date 11/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coldiron, Ron <hr/> Contributor address; City; State; Zip Code 6509 Marblewood Drive  Austin, TX 78731	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) Far West Optical
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Kevin <hr/> Contributor address; City; State; Zip Code 4101 Wildwood Rd  Austin, TX 78722	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Cole Law Firm
Date 10/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Griffin <hr/> Contributor address; City; State; Zip Code 2604 Stratford Dr  Austin, TX 78746	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Marketing and Public Relations		Employer (See Instructions) Words Matter

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/10 Rpt: 6/35
<b>2</b> FILER NAME Morrison, Laura		<b>3</b> Filer ID
<b>4</b> Date 11/02/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Beverly  <b>6</b> Contributor address; City; State; Zip Code 607 Patterson Ave  Austin, TX 78703	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
<b>Date</b> 11/03/2018	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehlers, Scott  <b>Contributor address; City; State; Zip Code</b> 3111 Carlisle Dr  Austin, TX 78757	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b> Attorney		<b>Employer (See Instructions)</b> Texas Indigent Defense Commission
<b>Date</b> 11/03/2018	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedholm, De Ann  <b>Contributor address; City; State; Zip Code</b> 4314 Sinclair Avenue  Austin, TX 78756	<b>Amount of Contribution (\$)</b>  \$40.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 11/04/2018	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman, Naomi  <b>Contributor address; City; State; Zip Code</b> 8823 Mountain Path Circle  Austin, TX 78759	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Baker		<b>Employer (See Instructions)</b> Self
<b>Date</b> 10/28/2018	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbons, Heidi  <b>Contributor address; City; State; Zip Code</b> 613 Hearn St  Austin, TX 78703	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b> Event Consultant		<b>Employer (See Instructions)</b> Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/10 Rpt: 7/35
2 FILER NAME Morrison, Laura		3 Filer ID
4 Date 10/28/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Ellen	7 Amount of Contribution (\$) \$350.00
	6 Contributor address; City; State; Zip Code 1701 S 6th St  Austin, TX 78704	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerrero, Linda	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code 3204 Fairfax Walk  Austin, TX 78705	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 11/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Lisa	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 4522 Avenue F  Austin, TX 78751	
Principal occupation / Job title (See Instructions) Commerical Title Examiner		Employer (See Instructions) Heritage Title Company
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huston, Christine	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 4206 Avenue D  Austin, TX 78751	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Iverson, Richard	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 506 W. 34th Street  Austin, TX 78705	
Principal occupation / Job title (See Instructions) Property Management		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/10 Rpt: 8/35
<b>2</b> FILER NAME Morrison, Laura		<b>3</b> Filer ID
<b>4</b> Date 10/28/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Elise <hr/> <b>6</b> Contributor address; City; State; Zip Code 209 W Main Street  Fayetteville, TX 78940	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>8</b> Principal occupation / Job title (See Instructions) Student		<b>9</b> Employer (See Instructions) Self
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Pam <hr/> Contributor address; City; State; Zip Code 209 W Main Street  Fayetteville, TX 78940	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) David Stone
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiobassa, Helen <hr/> Contributor address; City; State; Zip Code 11945 Elahl Ct  Moreno Valley, CA 92555	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lands II, Mable <hr/> Contributor address; City; State; Zip Code 6510 Berkman Dr  Austin, TX 78723	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lands II, Sterling <hr/> Contributor address; City; State; Zip Code 6510 Berkman Dr  Austin, TX 78723	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) FLIF - GCBC



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/10 Rpt: 9/35
<b>2</b> FILER NAME Morrison, Laura		<b>3</b> Filer ID
<b>4</b> Date 11/07/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langmore, John <hr/> <b>6</b> Contributor address; City; State; Zip Code 1408 Preston Ave  Austin, TX 78703	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/12/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langmore, John <hr/> Contributor address; City; State; Zip Code 1408 Preston Ave  Austin, TX 78703	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Michael <hr/> Contributor address; City; State; Zip Code PO Box 146  Austin, TX 78767	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCollom, Leslie <hr/> Contributor address; City; State; Zip Code 507 Kingfisher Creek Dr  Austin, TX 78748	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) O'Hanlon, Demerath & Castillo
Date 11/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mehdy, Mona <hr/> Contributor address; City; State; Zip Code 5004 Smokey Mountain Dr  Austin, TX 78727	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas at Austin

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/10 Rpt: 10/35
<b>2</b> FILER NAME Morrison, Laura		<b>3</b> Filer ID
<b>4</b> Date 11/02/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mims, Steve <hr/> <b>6</b> Contributor address; City; State; Zip Code 4606 Rosedale Ave  Austin, TX 78756	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Lecturer and Filmmaker		<b>9</b> Employer (See Instructions) University of Texas at Austin
Date 10/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Kathleen <hr/> Contributor address; City; State; Zip Code 1401 Kinney Ave  Austin, TX 78704	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) School Receptionist		Employer (See Instructions) St. Stephens Episcopal School
Date 11/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olewin, Carol <hr/> Contributor address; City; State; Zip Code 302 W Skyview Rd  Austin, TX 78752	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pobanz, Betsy <hr/> Contributor address; City; State; Zip Code 10037 Circleview Dr  Austin, TX 78733	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, James <hr/> Contributor address; City; State; Zip Code 5117 Prairie Dunes Dr  Austin, TX 78747	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) TexHealth

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/10 Rpt: 11/35
<b>2</b> FILER NAME Morrison, Laura		<b>3</b> Filer ID
<b>4</b> Date 11/04/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scaperotta, Wendy <hr/> <b>6</b> Contributor address; City; State; Zip Code 1502 Payne Ave  Austin, TX 78757	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Project Manager		<b>9</b> Employer (See Instructions) Travis County
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Linda <hr/> Contributor address; City; State; Zip Code 17117 FM 969  Manor, TX 78653	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shocket, Dick <hr/> Contributor address; City; State; Zip Code 6611 Jamaica Ct  Austin, TX 78757	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprinkle, Patricia <hr/> Contributor address; City; State; Zip Code 1114 Fieldcrest Dr  Austin, TX 78704	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Midwife		Employer (See Instructions) Self
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, David <hr/> Contributor address; City; State; Zip Code 209 W Main Street  Fayetteville, TX 78940	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Ranching		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/10 Rpt: 12/35
<b>2</b> FILER NAME Morrison, Laura		<b>3</b> Filer ID
<b>4</b> Date 10/28/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoughton, William <hr/> <b>6</b> Contributor address; City; State; Zip Code 3200 South Oak Drive  Austin, TX 78704	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tassin, Jay <hr/> Contributor address; City; State; Zip Code 1001 West 17th Street  Austin, TX 78701	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Amy <hr/> Contributor address; City; State; Zip Code 1402 E 2nd St  Austin, TX 78702	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Self
Date 10/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyson, Betsy <hr/> Contributor address; City; State; Zip Code 1006 Austin Highlands Blvd  Austin, TX 78745	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weed, Elizabeth <hr/> Contributor address; City; State; Zip Code 2218 Alta Vista Ave  Austin, TX 78704	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/10 Rpt: 13/35
<b>2</b> FILER NAME Morrison, Laura		<b>3</b> Filer ID
<b>4</b> Date 10/31/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Julia	<b>7</b> Amount of Contribution (\$)  \$350.00
	<b>6</b> Contributor address; City; State; Zip Code 3939 Bee Cave Rd. Bldg C 100 Austin, TX 78746	
<b>8</b> Principal occupation / Job title (See Instructions) Artist		<b>9</b> Employer (See Instructions) Self

**NON-MONETARY (IN-KIND) POLITICAL  
CONTRIBUTIONS****SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/1 Rpt: 14/35	
<b>2</b> FILER NAME Morrison, Laura		<b>3</b> Filer ID	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
<b>5</b> Date 11/06/2018	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuster, Stephanie <b>7</b> Contributor address; City; State; Zip Code 4619 Shoalwood Avenue Austin, TX 78756	<b>8</b> Amount of contribution (\$) \$124.00	<b>9</b> In-kind contribution description Cakes  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Owner		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) Upper Crust Bakery	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**LOANS****SCHEDULE E**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 15/35	
<b>2</b> FILER NAME Morrison, Laura		<b>3</b> Filer ID	
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$	
<b>5</b> Date of loan 11/13/2018	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Laura		<b>9</b> Loan Amount (\$) \$20,000.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code 3906 Bailey Lane  Austin, TX 78756		<b>10</b> Interest Rate
			<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions) Candidate		<b>13</b> Employer (See Instructions) Self	
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>	
<b>16</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor		<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code		
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/17 Rpt: 16/35	<b>2</b> FILER NAME Morrison, Laura	<b>3</b> Filer ID
<b>4</b> Date 11/05/2018	<b>5</b> Payee name AT&T	
<b>6</b> Amount (\$) \$52.20	<b>7</b> Payee address; City; State; Zip Code 5700 Burnet Rd  Austin, TX 78756	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense internet
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		
Date 10/28/2018	Payee name Anedot	
Amount (\$) \$8.50	Payee address; City; State; Zip Code 4017 Buena Vista St. #109  Dallas, TX 75204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online transaction fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		
Date 11/02/2018	Payee name Austin Chronicle	
Amount (\$) \$479.00	Payee address; City; State; Zip Code 4000 N Interstate 35 Frontage Rd  Austin, TX 78751	
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 Print Political Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/17 Rpt: 17/35	<b>2</b> FILER NAME Morrison, Laura	<b>3</b> Filer ID
<b>4</b> Date 11/09/2018	<b>5</b> Payee name Barbara Rush	
<b>6</b> Amount (\$) \$200.00	<b>7</b> Payee address; City; State; Zip Code 9819 Childress Drive  Austin, TX 78753	
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for food
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/18/2018	Candidate/Officeholder name Payee name Bouldin Creek Neighborhood Association	
Amount (\$) \$160.00	Office sought Payee address; City; State; Zip Code P. O. Box 3683  Austin, TX 78764	
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 Print Political Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/19/2018	Candidate/Officeholder name Payee name Brad Perkins	
Amount (\$) \$275.00	Office sought Payee address; City; State; Zip Code 1604 Glencrest Drive  Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/17 Rpt: 18/35	2 FILER NAME Morrison, Laura	3 Filer ID
4 Date 11/02/2018	5 Payee name Christopher Hutchins	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 1608 Poquito St. Unit A  Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/16/2018	Candidate/Officeholder name Payee name Christopher Hutchins	Office sought Office held
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 1608 Poquito St. Unit A  Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/01/2018	Candidate/Officeholder name Payee name City of Austin	Office sought Office held
Amount (\$) \$273.70	Payee address; City; State; Zip Code PO Box 2267  Austin, TX 78783	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Utilities
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/17 Rpt: 19/35	<b>2</b> FILER NAME Morrison, Laura	<b>3</b> Filer ID
<b>4</b> Date 11/13/2018	<b>5</b> Payee name City of Austin	
<b>6</b> Amount (\$) \$233.48	<b>7</b> Payee address; City; State; Zip Code PO Box 2267  Austin, TX 78783	
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Utilities
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held
Date 11/30/2018	Payee name Facebook	
Amount (\$) \$685.03	Payee address; City; State; Zip Code 1 Hacker Way  Melno Park, CA 94205	
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 Online Political Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held
Date 11/05/2018	Payee name Facebook	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 1 Hacker Way  Melno Park, CA 94205	
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 Online Political Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/17 Rpt: 20/35	<b>2</b> FILER NAME Morrison, Laura	<b>3</b> Filer ID
<b>4</b> Date 10/30/2018	<b>5</b> Payee name Facebook	
<b>6</b> Amount (\$) \$750.00	<b>7</b> Payee address; City; State; Zip Code 1 Hacker Way  Melno Park, CA 94205	
<b>8</b> 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 Online Political Advertising
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/31/2018	Candidate/Officeholder name	Office sought
Amount (\$) \$183.30	Payee name Facebook	Office held
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 Online Political Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/17/2018	Candidate/Officeholder name	Office sought
Amount (\$) \$20.00	Payee name Frost Bank	Office held
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/17 Rpt: 21/35		<b>2</b> FILER NAME Morrison, Laura		<b>3</b> Filer ID	
<b>4</b> Date 11/02/2018		<b>5</b> Payee name Fry's Electronics			
<b>6</b> Amount (\$) \$117.98		<b>7</b> Payee address; City; State; Zip Code 12707 MoPac Expy  Austin, TX 78727			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printer toner	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 11/13/2018		Candidate/Officeholder name Payee name HD Campaigns LLC			
Amount (\$) \$676.56		Payee address; City; State; Zip Code 4711 Spicewood Springs Road, Unit 227  Austin, TX 78758			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter Data and Research	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 11/23/2018		Candidate/Officeholder name Payee name Hootsuite Incorporated			
Amount (\$) \$47.97		Payee address; City; State; Zip Code 12 East 49th Street  New York, NY 10017			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Political Advertising	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/17 Rpt: 22/35		2 FILER NAME Morrison, Laura		3 Filer ID	
4 Date 12/06/2018		5 Payee name Hyde Park Neighborhood Association			
6 Amount (\$) \$100.00		7 Payee address; City; State; Zip Code 5001 Evans Avenue  Austin, TX 78751			
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 Print Political Advertising	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/19/2018		Payee name Jolene Kiolbassa			
Amount (\$) \$12,000.00		Payee address; City; State; Zip Code 3007 West Avenue  Austin, TX 78705			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/08/2018		Payee name Joyce Bosciano			
Amount (\$) \$303.00		Payee address; City; State; Zip Code 1907 W 34th Street  Austin, TX 78703			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Other		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for postage	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/17 Rpt: 23/35	<b>2</b> FILER NAME Morrison, Laura	<b>3</b> Filer ID
<b>4</b> Date 11/13/2018	<b>5</b> Payee name La Prensa	
<b>6</b> Amount (\$) \$34.75	<b>7</b> Payee address; City; State; Zip Code 1704 E 5th St #103  Austin, TX 78702	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print Political Advertising
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/05/2018	Candidate/Officeholder name Laura Morrison	Office sought Office held
Amount (\$) \$70.54	Payee address; City; State; Zip Code 3906 Bailey Lane  Austin, TX 78756	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement of credit card payment for food and beverage for meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/26/2018	Candidate/Officeholder name Lucas Burdick	Office sought Office held
Amount (\$) \$1,207.50	Payee address; City; State; Zip Code 7002 Bennett Avenue Apt B Austin, TX 78752	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/17 Rpt: 24/35	<b>2</b> FILER NAME Morrison, Laura	<b>3</b> Filer ID
<b>4</b> Date 11/13/2018	<b>5</b> Payee name Mailchimp	
<b>6</b> Amount (\$) \$79.95	<b>7</b> Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE, Suite 5000  Atlanta, GA 30308	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Email Communications
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 11/02/2018	Payee name Mary Ingle	
Amount (\$) \$100.70	Payee address; City; State; Zip Code 3406 Duval Street  Austin, TX 78705	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Other	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 11/02/2018	Payee name NGP VAN	
Amount (\$) \$625.00	Payee address; City; State; Zip Code PO Box 392264, Ste 202  Pittsburgh, PA 15251	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Database
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/17 Rpt: 25/35	<b>2</b> FILER NAME Morrison, Laura	<b>3</b> Filer ID
<b>4</b> Date 11/02/2018	<b>5</b> Payee name NGP VAN	
<b>6</b> Amount (\$) \$150.00	<b>7</b> Payee address; City; State; Zip Code PO Box 392264, Ste 202  Pittsburgh, PA 15251	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Database
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/02/2018	Candidate/Officeholder name Office sought Office held	
Payee name NGP VAN		
Amount (\$) \$75.00	Payee address; City; State; Zip Code PO Box 392264, Ste 202  Pittsburgh, PA 15251	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Online Database
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/02/2018	Candidate/Officeholder name Office sought Office held	
Payee name Office Depot		
Amount (\$) \$115.47	Payee address; City; State; Zip Code 2101 S Lamar Blvd  Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Labels and postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/02/2018	Candidate/Officeholder name Office sought Office held	
Payee name Office Depot		
Amount (\$) \$115.47	Payee address; City; State; Zip Code 2101 S Lamar Blvd  Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Labels and postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/17 Rpt: 26/35		<b>2</b> FILER NAME Morrison, Laura		<b>3</b> Filer ID
<b>4</b> Date 11/21/2018		<b>5</b> Payee name PAYA		
<b>6</b> Amount (\$) \$350.00		<b>7</b> Payee address; City; State; Zip Code 12120 Sunset Hills Road, Suite 500  Reston, VA 20190		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees  <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Credit Card Processing Fees</b>		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name Office sought Office held				
Date 11/02/2018		Payee name PAYA		
Amount (\$) \$663.87		Payee address; City; State; Zip Code 12120 Sunset Hills Road, Suite 500  Reston, VA 20190		
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees  <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Credit Card Processing Fees</b>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name Office sought Office held				
Date 12/03/2018		Payee name PAYA		
Amount (\$) \$106.29		Payee address; City; State; Zip Code 12120 Sunset Hills Road, Suite 500  Reston, VA 20190		
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees  <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Credit Card Processing Fees</b>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name Office sought Office held				

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/17 Rpt: 27/35		<b>2</b> FILER NAME Morrison, Laura		<b>3</b> Filer ID	
<b>4</b> Date 11/07/2018		<b>5</b> Payee name Premiere Political			
<b>6</b> Amount (\$) \$626.40		<b>7</b> Payee address; City; State; Zip Code 4805 Woodview Avenue  Austin, TX 78756			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Robocalls	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 11/13/2018		Payee name Premiere Political			
Amount (\$) \$338.96		Payee address; City; State; Zip Code 4805 Woodview Avenue  Austin, TX 78756			
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 Robocalls	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	
Date 10/29/2018		Payee name Rebecca Melancon			
Amount (\$) \$175.00		Payee address; City; State; Zip Code 509 E 38th St  Austin, TX 78705			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Other		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Returned Contribution	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/17 Rpt: 28/35	<b>2</b> FILER NAME Morrison, Laura	<b>3</b> Filer ID
<b>4</b> Date 11/19/2018	<b>5</b> Payee name SAGE - 3006 Guadalupe	
<b>6</b> Amount (\$) \$750.00	<b>7</b> Payee address; City; State; Zip Code 1717 W 6th St, Ste 390  Austin, TX 78703	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office rent
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2018	Payee name The Camarillo Group	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 307 Cottonwood Ln  Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2018	Payee name Threadgills	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 301 W Riverside Dr  Austin, TX 78704	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/17 Rpt: 29/35	<b>2</b> FILER NAME Morrison, Laura	<b>3</b> Filer ID
<b>4</b> Date 11/07/2018	<b>5</b> Payee name Threadgills	
<b>6</b> Amount (\$) \$2.09	<b>7</b> Payee address; City; State; Zip Code 301 W Riverside Dr  Austin, TX 78704	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for event
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		
Date 11/01/2018	Payee name Twitter Online Ads	
Amount (\$) \$32.42	Payee address; City; State; Zip Code 1355 Market Street, Suite 900  San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political online advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		
Date 11/02/2018	Payee name Twitter Online Ads	
Amount (\$) \$35.34	Payee address; City; State; Zip Code 1355 Market Street, Suite 900  San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political online advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/17 Rpt: 31/35		2 FILER NAME Morrison, Laura		3 Filer ID	
4 Date 11/14/2018		5 Payee name Weinberg Strategies			
6 Amount (\$) \$5,000.00		7 Payee address; City; State; Zip Code 1510 Norris Drive  Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/27/2018		Payee name Weinberg Strategies			
Amount (\$) \$4,750.00		Payee address; City; State; Zip Code 1510 Norris Drive  Austin, TX 78704			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/27/2018		Payee name Wetzel & Co			
Amount (\$) \$2,500.00		Payee address; City; State; Zip Code 8407 Appalachian Drive  Austin, TX 78759			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/17 Rpt: 30/35	<b>2</b> FILER NAME Morrison, Laura	<b>3</b> Filer ID
<b>4</b> Date 12/17/2018	<b>5</b> Payee name United State Postal Service	
<b>6</b> Amount (\$) \$51.00	<b>7</b> Payee address; City; State; Zip Code 3507 N Lamar Blvd  Austin, TX 78705	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PO Box Rental
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/30/2018	Candidate/Officeholder name Office sought Office held	
Payee name Villager Newspaper		
Amount (\$) \$160.00	Payee address; City; State; Zip Code 4132 E 12th St  Austin, TX 78721	
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 Print Political Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/18/2018	Candidate/Officeholder name Office sought Office held	
Payee name Vincent Limon		
Amount (\$) \$360.00	Payee address; City; State; Zip Code 905 Calle Limon  Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/17 Rpt: 32/35	<b>2</b> FILER NAME Morrison, Laura	<b>3</b> Filer ID
<b>4</b> Date 11/02/2018	<b>5</b> Payee name Worley Printing	
<b>6</b> Amount (\$) \$411.35	<b>7</b> Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd  Austin, TX 78759	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brochure Printing
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/13/2018	Candidate/Officeholder name Payee name Worley Printing	
Amount (\$) \$378.88	Office sought Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd  Austin, TX 78759	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brochure Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/19/2018	Candidate/Officeholder name Payee name Zilker Neighborhood Association	
Amount (\$) \$95.00	Office sought Payee address; City; State; Zip Code 2009 Arpdale  Austin, TX 78704	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print Political Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		



# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 1/1 Rpt: 33/35		2 FILER NAME Morrison, Laura		3 Filer ID	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$	
5 Date 10/31/2018		6 Payee name Joe's Bakery & Coffee Shop			
7 Amount (\$) \$70.54		8 Payee address; City; State; Zip Code 2305 East 7th Street  Austin, TX 78702			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food and beverage for meeting	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate/Officeholder name		Office sought		Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/1 Rpt: 34/35	<b>2</b> FILER NAME Morrison, Laura	<b>3</b> Filer ID
<b>4</b> Date 12/15/2018	<b>5</b> Payee name American Express	
<b>6</b> Amount (\$) \$70.54  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code PO Box 650448  Dallas, TX 75265	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment of credit card bill for food and beverage for meeting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

**INTEREST, CREDITS, GAINS, REFUNDS, AND  
CONTRIBUTIONS RETURNED TO FILER****SCHEDULE K**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 1/1 Rpt: 35/35
<b>2</b> FILER NAME Morrison, Laura		<b>3</b> Filer ID
<b>4</b> Date 12/05/2018	<b>5</b> Name of person from whom amount is received City of Ausitr	<b>8</b> Amount (\$)  \$164.44
	<b>6</b> Address of person from whom amount is received; City; State; Zip Code PO Box 2267  Austin, TX 78783	
	<b>7</b> Purpose for which amount is received returned utility deposit <input type="checkbox"/> Check if political contribution returned to filer	
Date 12/13/2018	Name of person from whom amount is received Hootsuite	Amount (\$)  \$47.97
	Address of person from whom amount is received; City; State; Zip Code 12 East 49th Street  New York, NY 10017	
	Purpose for which amount is received cancelled subscription <input type="checkbox"/> Check if political contribution returned to filer	
Date 11/30/2018	Name of person from whom amount is received NGP VAN	Amount (\$)  \$75.00
	Address of person from whom amount is received; City; State; Zip Code PO Box 392264, Ste 202  Pittsburgh, PA 15251	
	Purpose for which amount is received overpayment returned <input type="checkbox"/> Check if political contribution returned to filer	



## Affidavit of Contributions

I do solemnly swear that the cash proceeds, in the amount of \$ 521.00, were received at a fundraising event for which the stated ticket price was \$25 per person or less, held on 10/28/2018 (date of event) and verify that no individual made a cash contribution of more than \$50 in connection with the event, pursuant to City Code Section 2-2-51.

Laura Morrison  
Signature

1/14/2019  
Date

Laura Morrison  
Printed Name

Title (Candidate, Officeholder, or Campaign Treasurer): Candidate

STATE OF TEXAS  
COUNTY OF TRAVIS

This instrument was acknowledged, sworn to, and subscribed before me by Laura Morrison on the 14<sup>th</sup> day of January, 19, to certify which witness my hand and official seal.

[Signature]  
Notary Public in and for the State of Texas

Ymki van den Berg  
Typed or Printed Name of Notary Public

