

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090494		2 Total pages filed: 32	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Dr.		FIRST Jennifer	MI	
	NICKNAME		LAST Mushtaler	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; Po Box 303072  Austin, TX 78703		ZIP CODE	
		OFFICE USE ONLY			
		Date Received ELECTRONICALLY FILED 10/05/2020			
		Date Hand-delivered or Date Postmarked			
5 CAMPAIGN TREASURER NAME		MS / MRS / MR Randall		MI	
		NICKNAME		LAST Jamieson	
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4125 Canoas Drive  Austin, TX 78730			
7 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (713) 857-4225			
8 REPORT TYPE		<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED		Month Day Year    THROUGH    Month Day Year 08/07/2020    09/24/2020			
10 ELECTION		ELECTION DATE Month Day Year 11/03/2020		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)	

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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13 C / OH NAME	Mushtaler, Jennifer (Dr.)	14 Filer ID	(Ethics Commission Filers)
		00090494	

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	\$ 1,785.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 32,490.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 46.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 17,790.65
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 9,028.57
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFADAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Dr. Jennifer Mushtaler

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering      Printed name of officer administering      Title of officer administering oath

# SUBTOTALS - C/OH

## FORM C/OH COVER SHEET PG 3

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<b>18 FILER NAME</b> Mushtaler, Jennifer (Dr.)		<b>19 Filer ID</b> 00090494	(Ethics Commission Filers)
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	31,990.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	500.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	17,790.65
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/24 Rpt: 4/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 08/11/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Ed <hr/> <b>6</b> Contributor address; City; State; Zip Code 4104 Turkey Creek Rd  Austin, TX 78730	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 08/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Linda <hr/> Contributor address; City; State; Zip Code 4104 Turkey Creek Rd  Austin, TX 78730	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Basciano, Joyce <hr/> Contributor address; City; State; Zip Code 1907 34th Street  Austin, TX 78703	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Basciano, Joyce <hr/> Contributor address; City; State; Zip Code 1907 34th Street  Austin, TX 78703	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baselice, Julie <hr/> Contributor address; City; State; Zip Code 2708 Mountain Laurel Dr  Austin, TX 78703	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions) Baselice and Associates

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/24 Rpt: 5/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 08/31/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besterveld, Paul <b>6</b> Contributor address; City; State; Zip Code 4817 Laguna Ln Austin, TX 78746	<b>7</b> Amount of Contribution (\$) \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) unknown		<b>9</b> Employer (See Instructions) self
Date 09/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bezoni, Josh Contributor address; City; State; Zip Code 8508 Big View drive Austin, TX 78730	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) business		Employer (See Instructions) self
Date 08/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bins, John Contributor address; City; State; Zip Code 4023 Love Bird Ln Austin, TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brighton, Scott Contributor address; City; State; Zip Code 7904 Big View Drive Austin, TX 78730	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Aurea Software
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunch, Bill Contributor address; City; State; Zip Code 1307 Oxford Avenue Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Save Our Springs Alliance

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/24 Rpt: 6/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/23/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Cecilia <hr/> <b>6</b> Contributor address; City; State; Zip Code 6500 Santolina Cv  Austin, TX 78731	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 08/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkhardt, William <hr/> Contributor address; City; State; Zip Code 802 Christopher St  Austin, TX 78704	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Brkartstudio
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butts, George <hr/> Contributor address; City; State; Zip Code 4400 Michaels Cove  Austin, TX 78746	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheng, Ronald <hr/> Contributor address; City; State; Zip Code 3407 Greystone  Austin, TX 78731	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Restaurant Owner		Employer (See Instructions) Chinatown
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloren, Molly <hr/> Contributor address; City; State; Zip Code 8201 Big View Dr  Austin, TX 78730	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) homemaker		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: 4/24 Rpt: 7/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/03/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coopwood, Tom <hr/> <b>6</b> Contributor address; City; State; Zip Code 6717 Valburn Drive  Austin, TX 78731	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Michael <hr/> Contributor address; City; State; Zip Code 7000 N MO Pac Expy Ste 200  Austin, TX 78731	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) attorney-mediator		Employer (See Instructions) self
Date 09/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Steve <hr/> Contributor address; City; State; Zip Code 103 N Lowell Ln  Austin, TX 78733	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Marketing Manager		Employer (See Instructions) Dell
Date 08/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dewey, Janet <hr/> Contributor address; City; State; Zip Code 2612 Delwood Place  Austin, TX 78703	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) volunteer		Employer (See Instructions) self
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DiLeo, Traci <hr/> Contributor address; City; State; Zip Code 9 Niles Road  Austin, TX 78703	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Killam Company

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/24 Rpt: 8/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 08/18/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Jim <hr/> <b>6</b> Contributor address; City; State; Zip Code 11405 PRADERA DR  Austin, TX 78759	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) planner		<b>9</b> Employer (See Instructions) retired
Date 09/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eschner-Bezoni, Kim <hr/> Contributor address; City; State; Zip Code 8508 Big View drive  Austin, TX 78730	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estate of Nancy Lou <hr/> Contributor address; City; State; Zip Code 506 West 34th  Austin, TX 78705	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Femrite, Eric <hr/> Contributor address; City; State; Zip Code 8415 Big View Dr  Austin, TX 78730	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) real estate owner		Employer (See Instructions) self
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Jimmy <hr/> Contributor address; City; State; Zip Code 8108 Big View Drive  Austin, TX 78730	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) McDonald's Owner/Operator		Employer (See Instructions) MAXTAB



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/24 Rpt: 9/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/01/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Jill <hr/> <b>6</b> Contributor address; City; State; Zip Code 8524 Big View Dr  Austin, TX 78730	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) VP Marketing North America		<b>9</b> Employer (See Instructions) Chubb Insurance
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Steve <hr/> Contributor address; City; State; Zip Code 4609 Lyons Rd  Austin, TX 78702	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Tracey <hr/> Contributor address; City; State; Zip Code 10315 James Ryan Way  Austin, TX 78730	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Alexandria <hr/> Contributor address; City; State; Zip Code 98 San Jacinto Blvd #2501 Austin, TX 78701	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, John <hr/> Contributor address; City; State; Zip Code 98 San Jacinto Blvd #2501 Austin, TX 78701	Amount of Contribution (\$)  \$400.00
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: 7/24 Rpt: 10/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/04/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Patricia <hr/> <b>6</b> Contributor address; City; State; Zip Code 5008 Finley Drive Austin, TX 78731	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 08/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg, Betsy <hr/> Contributor address; City; State; Zip Code 3009 Washington Sq Austin, TX 78705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Faculty		Employer (See Instructions) UT
Date 08/26/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenway, James <hr/> Contributor address; City; State; Zip Code 2618 Spring Lane Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Greenway Law Firm
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gropper, Robert <hr/> Contributor address; City; State; Zip Code 7632, Elmridge Drive Boca Raton, FL 33433	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gropper, Robert <hr/> Contributor address; City; State; Zip Code 7632 Elmridge Drive Boca Raton, FL 33433	Amount of Contribution (\$) \$350.00
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: 8/24 Rpt: 11/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 08/20/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guarino, David <hr/> <b>6</b> Contributor address; City; State; Zip Code 605 East 38th Street  Austin, TX 78705	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Substitute Teacher		<b>9</b> Employer (See Instructions) Various School Districts
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guha, Sumit <hr/> Contributor address; City; State; Zip Code 5006 Rowena Avenue  Austin, TX 78751	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UT
Date 09/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gullahorn, Jack <hr/> Contributor address; City; State; Zip Code 5300 Gregg  Manor, TX 78652	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Jack Gullahorn, PC
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hachtman, Michael <hr/> Contributor address; City; State; Zip Code 13006 Conifer  Houston, TX 77079	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Relogistics Services		Employer (See Instructions) CEO
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harr, Bob <hr/> Contributor address; City; State; Zip Code 13003 Tilghman Trail  Austin, TX 78729	Amount of Contribution (\$)  \$100.00
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: 9/24 Rpt: 12/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/21/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayden, Charles <hr/> <b>6</b> Contributor address; City; State; Zip Code 10402 Treasure Island Dr  Austin, TX 78730	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 08/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebert, P. Michael <hr/> Contributor address; City; State; Zip Code 719 Carolyn  Austin, TX 78705	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self
Date 09/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Michael <hr/> Contributor address; City; State; Zip Code 10000 Inshore Drive  Austin, TX 78730	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
Date 08/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herzele, Charlotte <hr/> Contributor address; City; State; Zip Code 3916 Avenue H  Austin, TX 78751	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Asst Professor		Employer (See Instructions) UT
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Billy <hr/> Contributor address; City; State; Zip Code 4117 Canoas Drive  Austin, TX 78730	Amount of Contribution (\$)  \$400.00
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: 10/24 Rpt: 13/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/21/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Karon <hr/> <b>6</b> Contributor address; City; State; Zip Code 4117 Canoas Drive  Austin, TX 78730	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huebner, Darlene <hr/> Contributor address; City; State; Zip Code 10304 Mourning Dove Drive  Austin, TX 78750	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huebner, Richard <hr/> Contributor address; City; State; Zip Code 10304 Mourning Dove Drive  Austin, TX 78750	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingle, Mary <hr/> Contributor address; City; State; Zip Code 3406 Duval  Austin, TX 78705	Amount of Contribution (\$)  \$130.00
Principal occupation / Job title (See Instructions) Dressmaker		Employer (See Instructions) self
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamieson, Janet <hr/> Contributor address; City; State; Zip Code 4125 Canoas Drive  Austin, TX 78730	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) attorney		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: 11/24 Rpt: 14/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 08/19/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code 1907 West 36th Street  Austin, TX 78731	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Doctor		<b>9</b> Employer (See Instructions) Austin Maternal Fetal Medicine
Date 09/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallash, Saed <hr/> Contributor address; City; State; Zip Code 4109 Michael Neill Drive  Austin, TX 78730	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Landlord		Employer (See Instructions) Kallash Holding Corp
Date 08/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kane, Alan <hr/> Contributor address; City; State; Zip Code 8816 Big View Drive  Austin, TX 78730	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Kane Environmental Engineering
Date 08/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kane, Anne <hr/> Contributor address; City; State; Zip Code 8816 Big View Drive  Austin, TX 78730	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kansas, Bryan <hr/> Contributor address; City; State; Zip Code 8501 Spicewood Mesa Cove  Austin, TX 78759	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Austin Urology

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/24 Rpt: 15/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/16/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Pam <b>6</b> Contributor address; City; State; Zip Code PO Box 146  Austin, TX 78767	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) Executive Director		<b>9</b> Employer (See Instructions) Meyer Levy Trust
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Sara Contributor address; City; State; Zip Code 2822 Wooldridge Drive unit A  Austin, TX 78703	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/27/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Bryan Contributor address; City; State; Zip Code 1809 Lightsey Road  Austin, TX 78704	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) broadcasting		Employer (See Instructions) self
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, David Contributor address; City; State; Zip Code 1808 Kerr Street  Austin, TX 78704	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Mike Contributor address; City; State; Zip Code PO Box 146  Austin, TX 78767	Amount of Contribution (\$)  \$400.00
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: 13/24 Rpt: 16/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 08/24/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Derek <hr/> <b>6</b> Contributor address; City; State; Zip Code 201 West 5th Street  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) Commercial Real Estate		<b>9</b> Employer (See Instructions) LPC
Date 08/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Julie <hr/> Contributor address; City; State; Zip Code 201 West 5th Street  Austin, TX 78701	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowe, Claudette <hr/> Contributor address; City; State; Zip Code 400 Academy Drive  Austin, TX 78704	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lubin, Susan <hr/> Contributor address; City; State; Zip Code 2701 W 35th Street, Unit B  Austin, TX 78703	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyon, Sheila <hr/> Contributor address; City; State; Zip Code 800-B WINFLO DR  Austin, TX 78703	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) none



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/24 Rpt: 17/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 08/22/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mattax, Crissy <hr/> <b>6</b> Contributor address; City; State; Zip Code 8001 Big View Dr  Austin, TX 78730	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) homemaker		<b>9</b> Employer (See Instructions) self
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mattax, Crissy <hr/> Contributor address; City; State; Zip Code 8001 Big View Dr  Austin, TX 78730	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
Date 08/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mattax, Tim <hr/> Contributor address; City; State; Zip Code 8001 Big View Dr  Austin, TX 78730	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Upland Software
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mattax, Tim <hr/> Contributor address; City; State; Zip Code 8001 Big View Dr  Austin, TX 78730	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Upland Software
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matz and Co, LLC <hr/> Contributor address; City; State; Zip Code 1001 Congress Ave, Ste 450  Austin, TX 78701	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/24 Rpt: 18/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/02/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMurtry, Allan <hr/> <b>6</b> Contributor address; City; State; Zip Code 5901 Cary Dr  Austin, TX 78757	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) Wholesaler		<b>9</b> Employer (See Instructions) AMC Company
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meisenbach, Bert <hr/> Contributor address; City; State; Zip Code 1800 San Gabriel  Austin, TX 78701	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meisenbach, Megan <hr/> Contributor address; City; State; Zip Code 1800 San Gabriel  Austin, TX 78701	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) self
Date 09/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metteauer, Maureen <hr/> Contributor address; City; State; Zip Code 602 Harthan Street  Austin, TX 78703	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Legislative analyst		Employer (See Instructions) State of Texas
Date 09/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, John <hr/> Contributor address; City; State; Zip Code 8616 Big View  Austin, TX 78730	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/24 Rpt: 19/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/02/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Carol <hr/> <b>6</b> Contributor address; City; State; Zip Code 2205 Westover Road  Austin, TX 78703	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) unknown		<b>9</b> Employer (See Instructions) unknown
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Steve <hr/> Contributor address; City; State; Zip Code 2205 Westover Road  Austin, TX 78703	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions) Self
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myska, Cindy <hr/> Contributor address; City; State; Zip Code 3500 Mount Bonnell Road  Austin, TX 78731	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) self
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Nick <hr/> Contributor address; City; State; Zip Code 4549 Golf Vista Drive  Austin, TX 78730	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nossaman, George <hr/> Contributor address; City; State; Zip Code 6715 Bunkers Ct  Clifton, VA 20214	Amount of Contribution (\$)  \$400.00
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: 17/24 Rpt: 20/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 08/18/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nossaman, Greg <hr/> <b>6</b> Contributor address; City; State; Zip Code 3234 Foxvale Dr  Oakton, VA 22124	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Management		<b>9</b> Employer (See Instructions) G2
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nossaman, Judi <hr/> Contributor address; City; State; Zip Code 6715 Bunkers Ct  Clifton, VA 20124	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Rourke, Cynthia <hr/> Contributor address; City; State; Zip Code 3700 Lagood Drive  Austin, TX 78730	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) self
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Odette, John <hr/> Contributor address; City; State; Zip Code 3708 Humble Cv  Austin, TX 78730	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions) Nunaya
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olbart, Art <hr/> Contributor address; City; State; Zip Code 1906 Raleigh  Austin, TX 78703	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Olbart Consulting

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/24 Rpt: 21/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/15/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Lorri <b>6</b> Contributor address; City; State; Zip Code 8818 BIG VIEW DR UNIT 2 Austin, TX 78730	<b>7</b> Amount of Contribution (\$) \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Practice Manager		<b>9</b> Employer (See Instructions) FTI Consulting
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pemberton, Becky Contributor address; City; State; Zip Code 1214 Wilderness Drive Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Yates Energy
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Greg Contributor address; City; State; Zip Code 1306 Meriden Ln Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Software Executive		Employer (See Instructions) Zilliant
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Tess Contributor address; City; State; Zip Code 1306 Meriden Ln Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
Date 09/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinnelli, Janis Contributor address; City; State; Zip Code P. O. Box 50038 Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions) J Pinnelli Company, LLC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/24 Rpt: 22/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/03/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinnelli, Joe <hr/> <b>6</b> Contributor address; City; State; Zip Code P. O. Box 50038  Austin, TX 78763	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) CEP		<b>9</b> Employer (See Instructions) J Pinnelli Company LLC
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powe, Lucas <hr/> Contributor address; City; State; Zip Code 2617 DELWOOD PL  Austin, TX 78703	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UT
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Priest, Bernadette <hr/> Contributor address; City; State; Zip Code 2509 Greenlee Drive  Austin, TX 78703	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) self
Date 09/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Qualls, Tara <hr/> Contributor address; City; State; Zip Code 8416 Big View  Austin, TX 78730	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quintos, Karen <hr/> Contributor address; City; State; Zip Code 14716 Flat Top Ranch Road  Austin, TX 78732	Amount of Contribution (\$)  \$400.00
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: 20/24 Rpt: 23/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/24/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quintos, Tony <hr/> <b>6</b> Contributor address; City; State; Zip Code 14716 Flat Top Ranch Road  Austin, TX 78732	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rachkind, Ivar <hr/> Contributor address; City; State; Zip Code 10402 Treasure Island Dr  Austin, TX 78730	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Joe <hr/> Contributor address; City; State; Zip Code 2611 West 49th St  Austin, TX 78731	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roche, Becky <hr/> Contributor address; City; State; Zip Code 1600 Mt. Larson Rd.  Austin, TX 78746	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roche, David <hr/> Contributor address; City; State; Zip Code 1600 Mt. Larson Rd.  Austin, TX 78746	Amount of Contribution (\$)  \$400.00
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: 21/24 Rpt: 24/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 08/19/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Brian <hr/> <b>6</b> Contributor address; City; State; Zip Code 1112 West 9th Street  Austin, TX 78703	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Commercial real estate		<b>9</b> Employer (See Instructions) Rodgers and Reichle
Date 08/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronne, Nishi <hr/> Contributor address; City; State; Zip Code 4604 Beechwood Hollow  Austin, TX 78731	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Pediatrix Medical Group
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubin, Janice <hr/> Contributor address; City; State; Zip Code 7632, Elmridge Drive  Boca Raton, FL 33433	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubin, Janice <hr/> Contributor address; City; State; Zip Code 7632 Elmridge Drive  Boca Raton, FL 33433	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharplin, Sylvia <hr/> Contributor address; City; State; Zip Code 1105 W 10th St  Austin, TX 78703	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) real estate		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: 22/24 Rpt: 25/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/21/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sirhal, Colette <hr/> <b>6</b> Contributor address; City; State; Zip Code 1036 Liberty Park Dr. # 9B  Austin, TX 78746	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Bill <hr/> Contributor address; City; State; Zip Code 13012 Partridge Bend Drive  Austin, TX 78729	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spiesman, Bill <hr/> Contributor address; City; State; Zip Code 5700 Clay Avenue  Austin, TX 78756	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Sparkcognition
Date 09/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spriggs, Angelina <hr/> Contributor address; City; State; Zip Code 12203 Conrad Road  Austin, TX 78727	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Marcus and Millchap
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, David <hr/> Contributor address; City; State; Zip Code 209 West Main Street  Fayetteville, TX 78940	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Farrier		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: 23/24 Rpt: 26/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/12/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templeton, Laura <hr/> <b>6</b> Contributor address; City; State; Zip Code 5802 Lookout Mountain  Austin, TX 78731	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenzuela, Andy <hr/> Contributor address; City; State; Zip Code 7908 Big View Drive  Austin, TX 78730	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Calytera
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaught, Tracy <hr/> Contributor address; City; State; Zip Code 5929 Balcones Dr, STE 201  Austin, TX 78731	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Vaught Law Firm
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Clarence <hr/> Contributor address; City; State; Zip Code 4001 Lob Cove  Austin, TX 78730	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Julie <hr/> Contributor address; City; State; Zip Code 407 W 32nd  Austin, TX 78705	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/24 Rpt: 27/32
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 08/18/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Honora <hr/> <b>6</b> Contributor address; City; State; Zip Code 9805 Drip Rock Ln  Austin, TX 78730	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Unknown		<b>9</b> Employer (See Instructions) Unknown
Date 08/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worley, John <hr/> Contributor address; City; State; Zip Code 4106 Ave. A  Austin, TX 78751	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self
Date 08/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Courtney <hr/> Contributor address; City; State; Zip Code 10216 Milky Way Drive  Austin, TX 78730	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yudell, Patricia <hr/> Contributor address; City; State; Zip Code 9909 China Garden Cove  Austin, TX 78730	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Pink Skies Enterprises

# 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: 28/32	
<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)				<b>3</b> Filer ID (Ethics Commission Filers) 00090494	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				<b>\$</b>	
<b>5</b> Date 08/07/2020	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyd, Amanda <hr/> <b>7</b> Contributor address; City; State; Zip Code 406 West 34th St. B  Austin, TX 78705			<b>8</b> Amount of contribution (\$) \$100.00	<b>9</b> In-kind contribution description \$100 for filing fee
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) consultant			<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) self		
<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)					

  

Date 08/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Fred <hr/> Contributor address; City; State; Zip Code 4509 Edgemont Dr  Austin, TX 78731			Amount of contribution (\$) \$400.00	In-kind contribution description Paid \$400 of filing fee
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney			Employer (FOR NON-JUDICIAL) (See instructions) Self		
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)					

# 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: 1/4 Rpt: 29/32	<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 08/30/2020	<b>5</b> Payee name Boyd, Amanda	
<b>6</b> Amount (\$) \$2,000.00	<b>7</b> Payee address; City; State; Zip Code 406 West 34th St. B  Austin, TX 78705	
<b>8</b> 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 campaign management
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/15/2020	Candidate/Officeholder name Boyd, Amanda	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 406 West 34th St. B  Austin, TX 78705	
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 campaign management
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/15/2020	Candidate/Officeholder name Checkmark Typesetting	
Amount (\$) \$2,300.67	Payee address; City; State; Zip Code 327 N IH-35 Frontage  Austin, TX 78722	
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 Yard signs
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: 2/4 Rpt: 30/32	<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/15/2020	<b>5</b> Payee name Edwards, Aurora	
<b>6</b> Amount (\$) \$225.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 303072  Austin, TX 78703	
<b>8</b> 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 campaign general and administrative work
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/25/2020	Candidate/Officeholder name Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way  Menlo Park, CA 94025	
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 Facebook ads
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/09/2020	Candidate/Officeholder name HD Campaigns	
Amount (\$) \$2,577.67	Payee address; City; State; Zip Code 4711 Spicewood Spring Rd #227  Austin, TX 78757	
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 Lists, Web Development, FB ads
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: 3/4 Rpt: 31/32	<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 09/24/2020	<b>5</b> Payee name Sixth Street Printing	
<b>6</b> Amount (\$) \$265.21	<b>7</b> Payee address; City; State; Zip Code 1010 E 6th  Austin, TX 78702	
<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 Handouts and stickers
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/30/2020	Payee name Southern Creative Combustion	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 1305 Richcreek  Austin, TX 78757	
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 Design website, Facebook ads, social media, logo, other design work
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2020	Payee name Southern Creative Combustion	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 1305 Richcreek  Austin, TX 78757	
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 social media consulting and design work
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: 4/4 Rpt: 32/32	<b>2</b> FILER NAME Mushtaler, Jennifer (Dr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00090494
<b>4</b> Date 08/15/2020	<b>5</b> Payee name T-Mobile	
<b>6</b> Amount (\$) \$176.20	<b>7</b> Payee address; City; State; Zip Code 3909 N. IH-35  Austin, TX 78722	
<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 Phone and internet service
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/24/2020	Payee name Zoom	
Amount (\$) \$149.90	Payee address; City; State; Zip Code 55 Almaden Blvd  San Jose, CA 95113	
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 zoom services for meetings
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held