

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC
COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090519	2 Total pages filed: 10
3 COMMITTEE NAME Had Enough Austin?			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 11/16/2020 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 6836 Austin Center Blvd., #280 Austin, TX 78731		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ellen NICKNAME LAST SUFFIX Wood		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 6836 Austin Center Blvd., #280 Austin, TX 78731		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE TX		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 450-6550		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 Limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year Month Day Year 10/27/2020 THROUGH 11/16/2020		
11 ELECTION	ELECTION DATE Month Day Year 12/15/2020	ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **SPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Had Enough Austin?		13 Filer ID (Ethics Commission Filers) 00090519	
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME Ms. MacKenzie Kelly	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Council Member, District 6	
	<input type="checkbox"/> Measure	BALLOT IDENTIFICATION / # <div style="float: right; text-align: right;"> ELECTION DATE Month Day Year </div>	
		DESCRIPTION	
15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
<div style="border-top: 1px dashed black;"> EXPENDITURE TOTALS </div>	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 23,000.00
<div style="border-top: 1px dashed black;"> CONTRIBUTION BALANCE </div>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00
<div style="border-top: 1px dashed black;"> OUTSTANDING LOAN TOTALS </div>	4. TOTAL POLITICAL EXPENDITURES		\$ 49,863.95
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 22,776.45	
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00	

16 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.		
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.	_____ Ellen Wood Signature of Campaign Treasurer	
_____ Signature of officer administering oath	_____ Printed name of officer administering oath	_____ Title of officer administering oath

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE

FORM SPAC
ADDENDUM

Page 3 of 10

12 COMMITTEE NAME Had Enough Austin?		13 Filer ID (Ethics Commission Filers) 00090519
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICE HOLDER	CANDIDATE / OFFICE HOLDER NAME Jennifer Virden
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Council Member, District 10
	<input type="checkbox"/> MEASURE	BALLOT IDENTIFICATION ELECTION DATE MONTH DAY YEAR DESCRIPTION

SUBTOTALS - SPAC**FORM SPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME Had Enough Austin?		18 Filer ID (Ethics Commission Filers) 00090519
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 23,000.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 27,000.00
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 49,863.95
9.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
14.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/10
2 FILER NAME Had Enough Austin?		3 Filer ID (Ethics Commission Filers) 00090519
4 Date 11/12/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Budet, Tony <hr/> 6 Contributor address; City; State; Zip Code 3305 Steck Ave Austin, TX 78757	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Banker		9 Employer (See Instructions) UFCU
Date 11/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Bryan <hr/> Contributor address; City; State; Zip Code 303 Colorado Street Ste 2300 Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) DuBois Bryant & Campbell, LLP.
Date 11/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Steve <hr/> Contributor address; City; State; Zip Code 405 W. 14th Street Austin, TX 78701	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Executive Chairman		Employer (See Instructions) Capstar Partners
Date 11/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Mike <hr/> Contributor address; City; State; Zip Code Post Office Box 146 Austin, TX 78767	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: Sch: 1/2 Rpt: 6/10	
2 FILER NAME Had Enough Austin?		3 Filer ID (Ethics Commission Filers) 00090519	
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0.00	

5 Date 11/12/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cumby Development LLC <hr/> 7 Pledgor Address; City; State; Zip Code 9229 Waterford Center Blvd Austin, TX 78758	8 Amount of pledge (\$) \$10,000.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	9 In-kind description (If applicable)
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10 Principal occupation / Job title (See Instructions)	11 Employer (See Instructions)
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5 Date 11/12/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Gary <hr/> 7 Pledgor Address; City; State; Zip Code 401 Congress Ave, Ste 1500 Austin, TX 78701	8 Amount of pledge (\$) \$2,500.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	9 In-kind description (If applicable)
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10 Principal occupation / Job title (See Instructions) President	11 Employer (See Instructions) Heritage Title Company of Austin, Inc.
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5 Date 11/12/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harte, Chris <hr/> 7 Pledgor Address; City; State; Zip Code 327 Congress Ave #200 Austin, TX 78701	8 Amount of pledge (\$) \$2,000.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	9 In-kind description (If applicable)
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10 Principal occupation / Job title (See Instructions) Retired	11 Employer (See Instructions) Retired
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5 Date 11/12/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Ellen <hr/> 7 Pledgor Address; City; State; Zip Code 6836 Austin Center Boulevard Bldg 1 Ste 280 Austin, TX 78731	8 Amount of pledge (\$) \$2,500.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	9 In-kind description (If applicable)
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10 Principal occupation / Job title (See Instructions) CEO	11 Employer (See Instructions) VCFO
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PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 2/2 Rpt: 7/10

2 FILER NAME
Had Enough Austin?

3 Filer ID (Ethics Commission Filers)
00090519

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

11/12/2020

6 Full name of pledgor

Yokabaitis, Jonah

☐ out-of-state PAC (ID#: _____)

7 Pledgor Address; City; State; Zip Code

1110 Old Walsh Tarlton

Austin, TX 78746

8 Amount of
pledge (\$)

\$10,000.00

9 In-kind description
(If applicable)

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

10 Principal occupation / Job title (See Instructions)
Manager and Investor

11 Employer (See Instructions)
Retired

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: 1/3 Rpt: 8/10	2 FILER NAME Had Enough Austin?	3 Filer ID (Ethics Commission Filers) 00090519
4 Date 10/30/2020	5 Payee name American Bank	
6 Amount (\$) \$60.00	7 Payee address; City; State; Zip Code 3520 Bee Cave Rd #100 Austin, TX 78746	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense stop payment fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/28/2020	Payee name American Bank	
Amount (\$) \$12.50	Payee address; City; State; Zip Code 3520 Bee Cave Rd #100, Austin, TX 78746	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2020	Payee name Aro Group, LLC	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 2509 Lazy Oaks Drive Austin, TX 78745	
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 Digital Marketing
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: 2/3 Rpt: 9/10	2 FILER NAME Had Enough Austin?	3 Filer ID (Ethics Commission Filers) 00090519
4 Date 10/30/2020	5 Payee name Aro Group, LLC	
6 Amount (\$) \$5,250.00	7 Payee address; City; State; Zip Code 2509 Lazy Oaks Drive Austin, TX 78745	
8 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 PAC Management
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/01/2020	Payee name Aro Group, LLC	
Amount (\$) \$301.08	Payee address; City; State; Zip Code 2509 Lazy Oaks Drive Austin, TX 78745	
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 Text and phone messaging services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/16/2020	Payee name Aro Group, LLC	
Amount (\$) \$37,500.00	Payee address; City; State; Zip Code 2509 Lazy Oaks Drive Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Canvassing	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
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: 3/3 Rpt: 10/10	2 FILER NAME Had Enough Austin?	3 Filer ID (Ethics Commission Filers) 00090519
4 Date 11/01/2020	5 Payee name Genesis Strategies, LLC	
6 Amount (\$) \$487.20	7 Payee address; City; State; Zip Code P.O. Box 18297 Fountain Hills, AZ 85269	
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 Call and text messaging services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/29/2020	Payee name Paragon Printing and Mailing	
Amount (\$) \$460.78	Payee address; City; State; Zip Code 10423 Mc Kalla Place Austin, TX 78758	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 8x11 Mailer - 4/4 - Gloss 100C White, Printing and Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/16/2020	Payee name Southside Printing	
Amount (\$) \$792.39	Payee address; City; State; Zip Code 3005 S Lamar Boulevard Suite B-100 Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing expense - push cards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held