

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) 00090501		2 Total pages filed: 17	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Jennifer M		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2021		
	NICKNAME LAST SUFFIX Virden				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 8307 High Oak DR Austin, TX 78759			Date Hand-delivered or Date Postmarked	
				Receipt # Amount	
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Robin				
	NICKNAME LAST SUFFIX Coopwood				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4408 Spicewood Springs RD Austin, TX 78759				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 415-6772				
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 THROUGH Month Day Year 12/06/2020 12/31/2020				
10 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		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Council Member, District 10		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2 of 17

13 C / OH NAME	Virden, Jennifer M	14 Filer ID	(Ethics Commission Filers)
		00090501	

15 NOTICE FROM POLITICAL COMMITTEE(S) <input checked="" 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 checked="" type="checkbox"/> GENERAL	Austin Police Association PAC	
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS	
		5817 Wilcab RD	
		Austin, TX 78721	
	COMMITTEE CAMPAIGN TREASURER NAME		
	Escobar, Valencia		
	COMMITTEE CAMPAIGN TREASURER ADDRESS		
	5817 Wilcab RD		
	Austin, TX 78721		

16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	3,445.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	28,695.28
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	21,700.66
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.

Jennifer M Virden

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

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH
ADDENDUM

Page 3 of 17

C / OH NAME	Virden, Jennifer M	Filer ID	(Ethics Commission Filers)
		00090501	

17 NOTICE FROM POLITICAL COMMITTEE(S)	.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures ..	
	COMMITTEE TYPE	COMMITTEE NAME
	<input checked="" type="checkbox"/> GENERAL	Fight for Austin
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		807 Brazos ST Suite 408 Austin, TX 78701
	COMMITTEE CAMPAIGN TREASURER NAME	Cheney, Logan
	COMMITTEE CAMPAIGN TREASURER ADDRESS	807 Brazos ST Suite 408 Austin, TX 78701

NOTICE FROM POLITICAL COMMITTEE(S)	.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures ..	
	COMMITTEE TYPE	COMMITTEE NAME
	<input checked="" type="checkbox"/> GENERAL	SafeTX PAC
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		815 Brazos ST Suite 701 Austin, TX 78701
	COMMITTEE CAMPAIGN TREASURER NAME	Bury, III, Paul J.
	COMMITTEE CAMPAIGN TREASURER ADDRESS	815 Brazos ST Suite 701 Austin, TX 78701

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM **C/OH**
ADDENDUM

Page 4 of 17

C / OH NAME	Viriden, Jennifer M	Filer ID	(Ethics Commission Filers)
		00090501	

17 NOTICE FROM POLITICAL COMMITTEE(S)	.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. 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	Had Enough, Austin? PAC
	<input checked="" type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		6836 Austin Center BLVD Bldg. 1, Suite 280 Austin, TX 78731
	COMMITTEE CAMPAIGN TREASURER NAME	Wood, Ellen
	COMMITTEE CAMPAIGN TREASURER ADDRESS	6836 Austin Center BLVD Bldg. 1, Suite 280 Austin, TX 78731

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

5 of 17

18 FILER NAME Virden, Jennifer M		19 Filer ID (Ethics Commission Filers) 00090501
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,245.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 200.00
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	\$ 28,695.28
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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 223.97

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/5 Rpt: 6/17
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/13/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Gary <hr/> 6 Contributor address; City; State; Zip Code 8153 Meandering Way Austin, TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) General Manager		9 Employer (See Instructions) H-E-B
Date 12/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Shirley <hr/> Contributor address; City; State; Zip Code 2624 Tom Miller ST Austin, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chastain, Stephen <hr/> Contributor address; City; State; Zip Code 3501 Peregrine Falcon DR Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Spencer <hr/> Contributor address; City; State; Zip Code P. O. Box 5943 Austin, TX 78763	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-Employed
Date 12/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Jerry <hr/> Contributor address; City; State; Zip Code 8505 Adirondack CV Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/5 Rpt: 7/17
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/10/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Embrey, Ty <hr/> 6 Contributor address; City; State; Zip Code 2210 Newfield LN Austin, TX 78703	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 12/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Tracy <hr/> Contributor address; City; State; Zip Code 4813 Eagle Feather DR Austin, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kress, B. Alexander <hr/> Contributor address; City; State; Zip Code 1400 Hardouin AVE Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 12/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutz, William <hr/> Contributor address; City; State; Zip Code 1900 Scofield Ridge PKWY Apt. 4402 Austin, TX 78727	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Public Servant		Employer (See Instructions) State of Texas
Date 12/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mackey, John <hr/> Contributor address; City; State; Zip Code 505 Bowie ST Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Whole Foods Market

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/5 Rpt: 8/17
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Vincent G. <hr/> 6 Contributor address; City; State; Zip Code 4704 Hawkhaven LN Austin, TX 78727	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 12/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noble, William <hr/> Contributor address; City; State; Zip Code 217 Running Brook CV Driftwood, TX 78619	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) President & CEO		Employer (See Instructions) Noble Strategic Partners
Date 12/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perales, Rudy <hr/> Contributor address; City; State; Zip Code 3305 Treadsoft CV Austin, TX 78748	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Retired
Date 12/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pharr, Tami <hr/> Contributor address; City; State; Zip Code 124 Covington CV Georgetown, TX 78628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Present, Ian <hr/> Contributor address; City; State; Zip Code 51 Rainey ST Apt. 501 Austin, TX 78701	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Rainier Consulting

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/5 Rpt: 9/17
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes Jr., Sonny <hr/> 6 Contributor address; City; State; Zip Code 6506 Mesa DR Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Real Estate Management		9 Employer (See Instructions) Self
Date 12/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sager, Susan <hr/> Contributor address; City; State; Zip Code 4205 Greystone DR Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Pastoral Care		Employer (See Instructions) Self-Employed
Date 12/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Patrick <hr/> Contributor address; City; State; Zip Code 2904 Enfield RD Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Azalea Development
Date 12/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Ted <hr/> Contributor address; City; State; Zip Code 5905 Linaria CV Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Flex
Date 12/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thiede, Scott <hr/> Contributor address; City; State; Zip Code 1517 Wild Cat Hollow West Lake Hills, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self-Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/5 Rpt: 10/17
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, Matthew <hr/> 6 Contributor address; City; State; Zip Code 1412 W. 9th ST Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self-Employed
Date 12/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Word, Kirk <hr/> Contributor address; City; State; Zip Code 391 Las Colinas BLVD S Irving, TX 75039	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 11/17	
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/10/2020	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elgie, Ashley <hr/> 7 Contributor address; City; State; Zip Code 9111 Jollyville RD Suite 111 Austin, TX 78759	8 Amount of contribution (\$) \$100.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	9 In-kind contribution description Block walking.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Sales		11 Employer (FOR NON-JUDICIAL) (See instructions) MileStone Community Builders	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haechten, Kalym <hr/> Contributor address; City; State; Zip Code 9111 Jollyville RD Suite 111 Austin, TX 78759	Amount of contribution (\$) \$100.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description Block walking.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Sales		Employer (FOR NON-JUDICIAL) (See instructions) MileStone Community Builders	
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.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 12/17	2 FILER NAME Virden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/23/2020	5 Payee name Clark, Will	
6 Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code 363 Ranch Creek DR Austin, TX 78730	
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 Volunteer Coordinator
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2020	Payee name Cover 3	
Amount (\$) \$511.54	Payee address; City; State; Zip Code 2700 West Anderson LN Suite 202 Austin, TX 78757	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Runoff election.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2020	Payee name DonateWay	
Amount (\$) \$129.86	Payee address; City; State; Zip Code P. O. Box 301267 Austin, TX 78703	
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 Electronic contribution service fees.
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: 2/5 Rpt: 13/17	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/08/2020	5 Payee name Genuine Austin Radio	
6 Amount (\$) \$2,070.00	7 Payee address; City; State; Zip Code 912 S. Capital of TX Hwy. Suite 400 Austin, TX 78746	
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 Radio campaign ads.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/30/2020	Payee name Malkani, Ziem	
Amount (\$) \$427.50	Payee address; City; State; Zip Code 2100 Seven Wins DR Austin, TX 78733	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Photography	(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 photography.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/11/2020	Payee name Mobilize the Message	
Amount (\$) \$17,500.00	Payee address; City; State; Zip Code 490 Hanover Port LN Fort Walton Beach, FL 32547	
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 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: 3/5 Rpt: 14/17	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/16/2020	5 Payee name Moonshot Marketers, LLC	
6 Amount (\$) \$1,959.11	7 Payee address; City; State; Zip Code 2008 New York AVE Unit B Austin, TX 78702	
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 Google ads and website maintenance.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/11/2020	Payee name Office Depot	
Amount (\$) \$113.54	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
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 Printer toner cartridge.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2020	Payee name Parsons, Brad	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 3706 Greystone DR Austin, TX 78731	
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 Campaign signs distribution and retrieval.
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: 4/5 Rpt: 15/17	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/16/2020	5 Payee name Pinpoint Action, LLC	
6 Amount (\$) \$1,150.20	7 Payee address; City; State; Zip Code 10416 Turnbull Loop Austin, TX 78717	
8 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 Electronic communications.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/06/2020	Payee name USPS	
Amount (\$) \$190.40	Payee address; City; State; Zip Code 3575 Far West BLVD Austin, TX 78731-9998	
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 UPSP stamps.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2020	Payee name University Federal Credit Union	
Amount (\$) \$4.00	Payee address; City; State; Zip Code P. O. Box 9350 Austin, TX 78766	
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 Paper checks.
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: 5/5 Rpt: 16/17	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/14/2020	5 Payee name Viriden, Savannah	
6 Amount (\$) \$45.00	7 Payee address; City; State; Zip Code 1212 Castle Hill ST Unit 11 Austin, TX 78703	
8 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 Website edits and media design.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2020	Payee name Waterloo Media	
Amount (\$) \$2,040.00	Payee address; City; State; Zip Code 8309 N. IH 35 Austin, TX 78753	
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 Radio campaign ads.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2020	Payee name ZimWin Enterprises, LLC	
Amount (\$) \$54.13	Payee address; City; State; Zip Code 13492 Research BLVD #120-141 Austin, TX 78750	
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 Large campaign sign installation.
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 17/17
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/08/2020	5 Name of person from whom amount is received Community Impact Newspaper	8 Amount (\$) \$80.57
	6 Address of person from whom amount is received; City; State; Zip Code 16225 Impact Way #1 Pflugerville, TX 78660	
	7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Refund for non-delivery to one carrier route.	
Date 12/12/2020	Name of person from whom amount is received Jensen, Christine	Amount (\$) \$143.40
	Address of person from whom amount is received; City; State; Zip Code P. O. Box 92 Cedar Creek, TX 78612	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Refund for incomplete door-to-door literature delivery.	