

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers) 00090501		2 Total pages filed: 92		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Jennifer M		ELECTRONICALLY FILED 06/18/2021		
	NICKNAME LAST SUFFIX Viriden				
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15		<input type="checkbox"/> Runoff		Date Hand-delivered or Date Postmarked
	<input type="checkbox"/> July 15		<input type="checkbox"/> Exceeded modified reporting limit		
	<input checked="" type="checkbox"/> 30th day before election		<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		Receipt # Amount
	<input type="checkbox"/> 8th day before election		<input type="checkbox"/> Final Report (Attach C/OH-FR)		Date Processed
5 ORIGINAL PERIOD COVERED	Month Day Year 07/01/2020	THROUGH	Month Day Year 09/24/2020	Date Imaged	

6 EXPLANATION OF CORRECTION

Corrected the date of two Monetary Political Contributions (from a married couple) from the typographical error of 08/01/2020 to the correct date of 08/18/2020, per the canceled check.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

☐ **Semiannual reports:** I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☒ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Jennifer M Viriden

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

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: 92	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Jennifer M		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 06/18/2021		
	NICKNAME LAST SUFFIX Viriden				
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 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 modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/01/2020 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) Council Member, District 10		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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

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	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 56,301.76
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 24,952.18
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 78,545.10
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 50,000.00

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 Viriden

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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18 FILER NAME Virden, Jennifer M		19 Filer ID 00090501	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 55,751.76
2.	<input checked="" type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 550.00
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/>	SCHEDULE E: LOANS	\$ 50,000.00
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 23,561.78
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 154.45
9.	<input checked="" type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 1,235.95
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/69 Rpt: 5/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/19/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aicklen, Chad <hr/> 6 Contributor address; City; State; Zip Code 8402 Mesa Doble LN 0 Austin, TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Marybeth <hr/> Contributor address; City; State; Zip Code 17933 Valle De Lobo DR 0 Poway, CA 92064	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Applications Manager		Employer (See Instructions) KIC
Date 09/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alles, Susan <hr/> Contributor address; City; State; Zip Code 3712 Green Trails North 0 Austin, TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 09/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amey, Linda <hr/> Contributor address; City; State; Zip Code 2402 Indian TRL 0 Austin, TX 78703	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 08/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Angellini <hr/> Contributor address; City; State; Zip Code 1730 Canonero DR 0 Austin, TX 78746	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/69 Rpt: 6/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Dick 6 Contributor address; City; State; Zip Code 3700 N. Capital of Texas HWY Suite 420 Austin, TX 78746	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Real Estate, Investments		9 Employer (See Instructions) HPI
Date 09/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Kevin Contributor address; City; State; Zip Code 7812 Harvestman CV 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Customized Energy Solutions
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ansbaugh, Robert Contributor address; City; State; Zip Code 3113 Lynridge DR 0 Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Army		Employer (See Instructions) Texas Military Department
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arbuckle, Tom Contributor address; City; State; Zip Code P. O. Box 14103 0 Austin, TX 78761	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Self-Employed
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armour, J.M. Contributor address; City; State; Zip Code 6406 Cerro CV 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		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: 3/69 Rpt: 7/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/28/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Philip <hr/> 6 Contributor address; City; State; Zip Code 8524 Woodstone DR 0 Austin, TX 78757	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Handyman		9 Employer (See Instructions) Self-Employed
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aune, Jon <hr/> Contributor address; City; State; Zip Code 374 King Arthur CT 0 Austin, TX 78746	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-Employed
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Sara <hr/> Contributor address; City; State; Zip Code 4909 Westview DR 0 Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Ascension
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Wayne <hr/> Contributor address; City; State; Zip Code 10402 Misty Hollow CV 0 Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Alan <hr/> Contributor address; City; State; Zip Code 7706 Stoneywood DR 0 Austin, TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/69 Rpt: 8/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/11/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Carol <hr/> 6 Contributor address; City; State; Zip Code 113 Bass CV 0 Austin, TX 78737	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Bookkeeper		9 Employer (See Instructions) Self-Employed
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartlett, Jet <hr/> Contributor address; City; State; Zip Code 2508 Greenlee DR #1 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Erwin <hr/> Contributor address; City; State; Zip Code 1000 North Weston LN Austin, TX 78733	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergstrom, Alan <hr/> Contributor address; City; State; Zip Code 4505 Spicewood Springs RD Suite 104 Austin, TX 78759	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) Eagle Securities
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berryman, Robert <hr/> Contributor address; City; State; Zip Code 201 Dakota DR 0 Georgetown, TX 78633	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Fintech		Employer (See Instructions) CSI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/69 Rpt: 9/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/20/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beuerlein, Laura <hr/> 6 Contributor address; City; State; Zip Code 2605 Woodmont AVE 0 Austin, TX 78703	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions) Heritage Title Company
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birk, Carla <hr/> Contributor address; City; State; Zip Code 1701 Jackpot Run 0 Leander, TX 78641	Amount of Contribution (\$) \$50.00
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#: _____) Blodgett, William <hr/> Contributor address; City; State; Zip Code 178 Bryan CT 0 Charlottesville, VA 22902	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) UVA
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bohls, Laura <hr/> Contributor address; City; State; Zip Code 3801 Eastledge DR 0 Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Tex Reatly
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borgstrom, James <hr/> Contributor address; City; State; Zip Code 7009 Juneberry CV 0 Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/69 Rpt: 10/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/02/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brammer, John 6 Contributor address; City; State; Zip Code 7609 Forest Wood RD 0 Austin, TX 78745	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Greenhouse Sales, Service, Installation		9 Employer (See Instructions) Acacia Specialty Builders
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broline, Kay Contributor address; City; State; Zip Code 3937 Balcones DR 0 Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self-Employed
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Darren Contributor address; City; State; Zip Code 4313 Dunning LN 0 Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self-Employed
Date 08/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckner, Margo Contributor address; City; State; Zip Code 6209 Ledge Mountain DR 0 Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckner, Margo Contributor address; City; State; Zip Code 6209 Ledge Mountain DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/69 Rpt: 11/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/21/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckner, Margo <hr/> 6 Contributor address; City; State; Zip Code 6209 Ledge Mountain DR 0 Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buerger, Andrew <hr/> Contributor address; City; State; Zip Code 2408 West 8th ST 0 Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Business and Health Care		Employer (See Instructions) Self-Employed
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bufkin, James <hr/> Contributor address; City; State; Zip Code 2309 West 8th ST 0 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Bufkin Engineering
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bula, Gerard <hr/> Contributor address; City; State; Zip Code 2108 Trail of Madrones 0 Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnd, Melody <hr/> Contributor address; City; State; Zip Code 1704 Grassy Field RD 0 Austin, TX 78737	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/69 Rpt: 12/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/20/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnett, Christopher <hr/> 6 Contributor address; City; State; Zip Code 9009 Great Hills TRL #1423 Austin, TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) State of Texas
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, josephH Howell <hr/> Contributor address; City; State; Zip Code 2113 Zach Scott ST 0 Austin, TX 78723	Amount of Contribution (\$) \$17.76
Principal occupation / Job title (See Instructions) Senior Project Manager		Employer (See Instructions) Jones Lang LaSalle
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 4702 Valley Oak DR 0 Austin, TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callaway, Scott <hr/> Contributor address; City; State; Zip Code 11215 Research BLVD Apt. 2049 Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Tax Examiner		Employer (See Instructions) IRS
Date 08/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calvert, Stanton C. <hr/> Contributor address; City; State; Zip Code 3913 Greystone DR 0 Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Education

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/69 Rpt: 13/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/19/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canfield, Raymond <hr/> 6 Contributor address; City; State; Zip Code 3710 Enfield RD 0 Austin, TX 78703	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Shoal Creek Saloon
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Tommy <hr/> Contributor address; City; State; Zip Code 250 Colonial Affair 0 Austin, TX 78737	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) Carlson, Brigance and Doering
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrier, Amy <hr/> Contributor address; City; State; Zip Code 1100 Toyath ST 0 Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) NA
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Collin <hr/> Contributor address; City; State; Zip Code 6515 Hyridge Hollow DR 0 Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sr. IT Architect		Employer (See Instructions) General Motors
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheng, Ronald <hr/> Contributor address; City; State; Zip Code 3407 Greystone DR 0 Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Chinatown Restaurant		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/69 Rpt: 14/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/01/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clardy, Joanna <hr/> 6 Contributor address; City; State; Zip Code 6723 Beauford DR 0 Austin, TX 78750	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 08/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, William <hr/> Contributor address; City; State; Zip Code 3634 Ranch Creek DR 0 Austin, TX 78730	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Azure Cloud Architect		Employer (See Instructions) Texas Conference of Urban Counties
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clawson, Michael <hr/> Contributor address; City; State; Zip Code 3308 Glenview AVE 0 Austin, TX 78703	Amount of Contribution (\$) \$199.00
Principal occupation / Job title (See Instructions) Real Estate Investor, Atty, COO Title business		Employer (See Instructions) Michael Clawson
Date 09/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffman, Gary <hr/> Contributor address; City; State; Zip Code 1604 Fortview RD 0 Austin, TX 78704	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Austin Aqua-Dome
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook Olcese, Christy <hr/> Contributor address; City; State; Zip Code 4515 Balcones DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Director of Sales		Employer (See Instructions) Cisco Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/69 Rpt: 15/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/27/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coopwood, Ben <hr/> 6 Contributor address; City; State; Zip Code 7821 West Rim DR 0 Austin, TX 78731	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Surgeon		9 Employer (See Instructions) Ascension
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coopwood, Katie <hr/> Contributor address; City; State; Zip Code 1809 West 39th ST 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Norton Rose Fulbright
Date 08/27/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coopwood, Robin <hr/> Contributor address; City; State; Zip Code 7821 West Rim DR 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coopwood, Travis <hr/> Contributor address; City; State; Zip Code 6000 Shepherd Mountain CV 1110 Austin, TX 78730	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 08/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotner, Cristina <hr/> Contributor address; City; State; Zip Code 4400 Bunny Run 0 Austin, TX 78746	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Consultant		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: 12/69 Rpt: 16/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/20/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craite, John <hr/> 6 Contributor address; City; State; Zip Code 4411 Spicewood Springs RD #1716 Austin, TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) John S. Craite
Date 09/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craycroft, Richard <hr/> Contributor address; City; State; Zip Code 9310 Knoll Crest Loop 0 Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Real Estate Inspector		Employer (See Instructions) Hill Country Inspections
Date 09/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Dawn <hr/> Contributor address; City; State; Zip Code 3206 Rivercrest DR 0 Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) NA
Date 09/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Gregory <hr/> Contributor address; City; State; Zip Code 3206 Rivercrest DR 0 Austin, TX 78746	Amount of Contribution (\$) \$400.00
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#: _____) Cullington, Gayle <hr/> Contributor address; City; State; Zip Code 901 Baylor ST 0 Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired RN		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/69 Rpt: 17/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/20/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dahl-Burg, Tracy <hr/> 6 Contributor address; City; State; Zip Code 9705 Eagle Rising CV 0 Austin, TX 78730	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Advantage Austin Properties, LLC
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daugherty, Gordon <hr/> Contributor address; City; State; Zip Code 8807 Wildridge DR 0 Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Retired
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Derby <hr/> Contributor address; City; State; Zip Code 8325 Jancy DR 0 Austin, TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) The David Partners, Ltd
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Gary <hr/> Contributor address; City; State; Zip Code 5831 Tributary Ridge DR 0 Austin, TX 78759	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self-Employed
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Shelly <hr/> Contributor address; City; State; Zip Code 3209 Stevenson AVE 0 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/69 Rpt: 18/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/17/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Demarest, Stephen <hr/> 6 Contributor address; City; State; Zip Code 2000 Far Gallant DR 0 Austin, TX 78746	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickerson, Mary <hr/> Contributor address; City; State; Zip Code 2708 W 35th ST 0 Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CPA/RN		Employer (See Instructions) NA
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draper, Brande <hr/> Contributor address; City; State; Zip Code 3913 Bonnell DR 0 Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Demandbase
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Driver, Susan <hr/> Contributor address; City; State; Zip Code 8 Woodstone Square 0 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Retired
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dryden, Benita <hr/> Contributor address; City; State; Zip Code 3303 Northland DR Suite 212 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/69 Rpt: 19/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/21/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dryden, Kenny <hr/> 6 Contributor address; City; State; Zip Code 3303 Northland DR Suite 212 Austin, TX 78731	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Commercial Real Estate Broker		9 Employer (See Instructions) Self-Employed
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Richard <hr/> Contributor address; City; State; Zip Code 6528 Heron DR 0 Austin, TX 78759	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#: _____) Erminger, Dorothy <hr/> Contributor address; City; State; Zip Code 11751 D K Ranch RD 0 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Loan Officer		Employer (See Instructions) Churchill Mortgage Corp.
Date 08/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erthal, David <hr/> Contributor address; City; State; Zip Code 3521 Fawn Creek Path 0 Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Davenport Ranch
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evert, Gaye <hr/> Contributor address; City; State; Zip Code 5920 Highland Hills DR 0 Austin, TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/69 Rpt: 20/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/21/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabacher, Mary Helen <hr/> 6 Contributor address; City; State; Zip Code 1102 West 9th ST 0 Austin, TX 78703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farcasiu, Simina <hr/> Contributor address; City; State; Zip Code 6007 Lonesome Valley TRL 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Investment Manager		Employer (See Instructions) Belstar Management Company
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farris, Jennifer <hr/> Contributor address; City; State; Zip Code 6620 A Hart LN 0 Austin, TX 78731	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions) Aag
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faulkner, Mark <hr/> Contributor address; City; State; Zip Code 4008 Idalia DR 0 Austin, TX 78949	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feiner, Robert <hr/> Contributor address; City; State; Zip Code 6605 Dogwood Creek DR 0 Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Dell Technologies

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/69 Rpt: 21/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/19/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Josh <hr/> 6 Contributor address; City; State; Zip Code 7703 Pleasant Meadow CIR 0 Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self-Employed
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisk, Carter <hr/> Contributor address; City; State; Zip Code 3302 Yellowpine TER 0 Austin, TX 78757	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Self-Employed
Date 08/26/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanagan, Karen <hr/> Contributor address; City; State; Zip Code 12301 Bar X DR 0 Austin, TX 78727	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Dietitian		Employer (See Instructions) WebNutri
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Cornelia <hr/> Contributor address; City; State; Zip Code 4511 Island CV 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 09/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Charles <hr/> Contributor address; City; State; Zip Code 450 Lemens AVE 0 Hutto, TX 78634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Structural Engineer		Employer (See Instructions) Self-Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/69 Rpt: 22/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/18/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedrich, Susan <hr/> 6 Contributor address; City; State; Zip Code 10504 Painted Valley CV 0 Austin, TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Bookkeeper		9 Employer (See Instructions) Self-Employed
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fudman, Edward <hr/> Contributor address; City; State; Zip Code 5910 Doone Valley CT 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Retired
Date 09/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Bryan <hr/> Contributor address; City; State; Zip Code 105 South Laurelwood DR 0 Austin, TX 78733	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Contigo Technology
Date 09/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Christopher <hr/> Contributor address; City; State; Zip Code 4612 Ridge Oak DR 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Sue Ann <hr/> Contributor address; City; State; Zip Code 2600 Lake Austin BLVD Apt. 2102 Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/69 Rpt: 23/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/21/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gambrell, Cassie <hr/> 6 Contributor address; City; State; Zip Code 1611 Mount Larson RD 0 Austin, TX 78746	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired Teacher		9 Employer (See Instructions) Retired
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, William <hr/> Contributor address; City; State; Zip Code 3216 Bonnie RD 0 Austin, TX 78703	Amount of Contribution (\$) \$200.00
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#: _____) Germain, Jordan <hr/> Contributor address; City; State; Zip Code 4814 Twin Valley DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Germain, Patrick <hr/> Contributor address; City; State; Zip Code 4814 Twin Valley DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonder, Rick <hr/> Contributor address; City; State; Zip Code 7904 Arbor Knoll CT 0 Lago Vista, TX 78645	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/69 Rpt: 24/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Emily 6 Contributor address; City; State; Zip Code 2801 Robbs Run Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, William Contributor address; City; State; Zip Code 2801 Robbs Run Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granger, Elizabeth Contributor address; City; State; Zip Code 2612 Wooldridge DR 0 Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self-Employed
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granger, Tom Contributor address; City; State; Zip Code 2613 Wooldridge DR 0 Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Wagner, Eubanks, and Nichols
Date 09/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg, Jeff Contributor address; City; State; Zip Code 4814 Twin Valley DR 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Thrive FP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/69 Rpt: 25/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/30/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Leslie <hr/> 6 Contributor address; City; State; Zip Code 3919 Sierra DR 0 Austin, TX 78731	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Habitzreiter, Ronald <hr/> Contributor address; City; State; Zip Code 3603 Lucas DR 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 08/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagen, James <hr/> Contributor address; City; State; Zip Code 3700 Bonnie RD 0 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halich, Jessica <hr/> Contributor address; City; State; Zip Code 5732 Misty Hill CV 0 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Diatt Enterprises LLC		Employer (See Instructions) Self-Employed
Date 09/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halterman, Gwendolyn <hr/> Contributor address; City; State; Zip Code 3903 Woodchester LN 0 Austin, TX 78727	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Freescale

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/69 Rpt: 26/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/22/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hancock, Jennifer <hr/> 6 Contributor address; City; State; Zip Code 3911 Bonnell DR 0 Austin, TX 78731	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Self-Employed
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardage, John <hr/> Contributor address; City; State; Zip Code P. O. Box 1540 0 Giddings, TX 78942	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired Police Officer		Employer (See Instructions) Retired
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardeman, Bryan <hr/> Contributor address; City; State; Zip Code 6757 Airport BLVD 0 Austin, TX 78752	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self-Employed
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatton, William <hr/> Contributor address; City; State; Zip Code 11808 Charing Cross RD 0 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Construction Management		Employer (See Instructions) Sabre Commercial
Date 08/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hays, Sterling <hr/> Contributor address; City; State; Zip Code 4303 Rimdale DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RPh and USAF (Ret)		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/69 Rpt: 27/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/10/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Head, Ray <hr/> 6 Contributor address; City; State; Zip Code 7502 Downridge DR 0 Austin, TX 78731	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Property Tax Consultant		9 Employer (See Instructions) Retired
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Head, Ray <hr/> Contributor address; City; State; Zip Code 7502 Downridge DR 0 Austin, TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Property Tax Consultant		Employer (See Instructions) Retired
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebert, Walter <hr/> Contributor address; City; State; Zip Code 1301 West 40th ST 0 Austin, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Homeland Security		Employer (See Instructions) Retired
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heckmann, Kris <hr/> Contributor address; City; State; Zip Code 4305 Endcliffe DR 0 Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Granite Public Affairs
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helgeson, Pat <hr/> Contributor address; City; State; Zip Code 5612 Oakwood CV #152 Austin, TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) RE Developer		Employer (See Instructions) Sparrow

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/69 Rpt: 28/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/21/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helwig, Blaine <hr/> 6 Contributor address; City; State; Zip Code 8210 Bent Tree RD #210 Austin, TX 78759	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hersey, Paul E <hr/> Contributor address; City; State; Zip Code P. O. Box 160784 0 Austin, TX 78716	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Higdon, Charles <hr/> Contributor address; City; State; Zip Code 111 Breakaway RD 0 Cedar Park, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consulting Broker		Employer (See Instructions) Higdon Employee Benefits LLC
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Highsmith, Madelon <hr/> Contributor address; City; State; Zip Code 7104 West Rim DR 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Real Estate Design and Investor		Employer (See Instructions) Alamo Studios
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Richard <hr/> Contributor address; City; State; Zip Code 2303 Windsor RD 0 Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) RE		Employer (See Instructions) HPI

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/69 Rpt: 29/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/05/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbd, Josh <hr/> 6 Contributor address; City; State; Zip Code 8801 Honeysuckle TRL 0 Austin, TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) J P Hobbs inc
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holeman, Mike <hr/> Contributor address; City; State; Zip Code 5704 Sunset RDG 0 Austin, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmberg, Daina <hr/> Contributor address; City; State; Zip Code 8305 Adirondack TRL 0 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HR Manager		Employer (See Instructions) HeartFlow, Inc.
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holubec, Paul <hr/> Contributor address; City; State; Zip Code 3318 Bowman AVE 0 Austin, TX 78703	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) PlainsCapital Bank
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hornfischer, Jim <hr/> Contributor address; City; State; Zip Code 2528 Tanglewood TRL 0 Austin, TX 78703	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/69 Rpt: 30/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/02/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hornickel, Deborah <hr/> 6 Contributor address; City; State; Zip Code 3206 Oakmont BLVD 0 Austin, TX 78703	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hornickel, Deborah <hr/> Contributor address; City; State; Zip Code 3206 Oakmont BLVD 0 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, John <hr/> Contributor address; City; State; Zip Code 3111 Westlake DR 0 Austin, TX 78746	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-Employed
Date 08/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Xin <hr/> Contributor address; City; State; Zip Code 5844 Westslope DR 0 Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Hanger, Inc.
Date 09/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudgins, Jay <hr/> Contributor address; City; State; Zip Code 7600 Valburn DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate Investments		Employer (See Instructions) St. Germain Street Investments, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/69 Rpt: 31/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/17/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutnick, Peter <hr/> 6 Contributor address; City; State; Zip Code 14001 Avery Ranch BLVD Unit 2001 Austin, TX 78717	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hyland, Diana <hr/> Contributor address; City; State; Zip Code 5101 Crestway DR 0 Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobus, Shelly <hr/> Contributor address; City; State; Zip Code 2106 Schulle AVE 0 Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Tech		Employer (See Instructions) Salesforce
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Brian <hr/> Contributor address; City; State; Zip Code 1515 Resaca BLVD 5 Austin, TX 78738	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) BLJ Property Inc.
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Vincent <hr/> Contributor address; City; State; Zip Code 611 Maple AVE Apt. H Reidsville, NC 27320	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Manufacturing		Employer (See Instructions) Gilbarco Inc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/69 Rpt: 32/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jobe, Connie <hr/> 6 Contributor address; City; State; Zip Code 3705 Windsor RD 0 Austin, TX 78703	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self-Employed
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Marc <hr/> Contributor address; City; State; Zip Code 309 Oak Plaza CV 0 Georgetown, TX 78628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Q2
Date 09/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William <hr/> Contributor address; City; State; Zip Code 10123 Dianella LN 0 Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnstone, Jim <hr/> Contributor address; City; State; Zip Code 4007 Bunny Run 0 Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, S Todd <hr/> Contributor address; City; State; Zip Code 2205 McCullough ST 0 Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) STJones, LLC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/69 Rpt: 33/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/19/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Bob <hr/> 6 Contributor address; City; State; Zip Code 7007 Valburn DR 0 Austin, TX 78731	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) Texas Municipal Power Agency
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Pat <hr/> Contributor address; City; State; Zip Code 7008 Valburn DR 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Retired
Date 09/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kameda, Julie <hr/> Contributor address; City; State; Zip Code 304 Bent Tree CT 0 West Lake Hills, TX 78746	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaye, Edward <hr/> Contributor address; City; State; Zip Code 2303 Fortune 0 austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 09/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keedy, Mark <hr/> Contributor address; City; State; Zip Code 3625 Malone DR 0 Austin, TX 78749	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) PIP

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/69 Rpt: 34/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/22/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Timothy <hr/> 6 Contributor address; City; State; Zip Code 7408 Turnbuoy DR 0 Austin, TX 78730	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) President/COO		9 Employer (See Instructions) AFG
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kestranek, Gregg <hr/> Contributor address; City; State; Zip Code 7008 Fireoak DR 0 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Information Technology		Employer (See Instructions) US Federal Govenment
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiker, Tom <hr/> Contributor address; City; State; Zip Code 7122 Wood Hollow DR #23 Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Thomas <hr/> Contributor address; City; State; Zip Code 4100 Cat Hollow DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Manufacturing		Employer (See Instructions) Infineon
Date 09/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knouse, Lee <hr/> Contributor address; City; State; Zip Code 2800 Angelina DR 0 Round Rock, TX 78665	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Detective		Employer (See Instructions) Austin Police Department

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/69 Rpt: 35/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/15/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knudson, Randy <hr/> 6 Contributor address; City; State; Zip Code 9604 Holly Springs DR 0 Austin, TX 78748	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) TCO		9 Employer (See Instructions) IRS
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koslow, Claudia <hr/> Contributor address; City; State; Zip Code 1301 West 40th ST 0 Ausitn, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovacs, Robert <hr/> Contributor address; City; State; Zip Code 7009 Winterberry DR 0 austin, TX 78750	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 08/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kozak, Jeanna <hr/> Contributor address; City; State; Zip Code 4251 FM 2181 230136 Corinth, TX 76210	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Himana
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kozak, Jeanna <hr/> Contributor address; City; State; Zip Code 4251 FM 2181 230136 Corinth, TX 76210	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/69 Rpt: 36/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/02/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kozuh, Joseph 6 Contributor address; City; State; Zip Code 3839 Dry Creek DR Condo 136 Austin, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kozuh, Joseph Contributor address; City; State; Zip Code 3839 Dry Creek DR Condo 136 Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krause, J Winston Contributor address; City; State; Zip Code 3605 Balcones DR 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 09/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krause, Sheri Contributor address; City; State; Zip Code 3605 Balcones DR 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self-Employed
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kulp, Gary Contributor address; City; State; Zip Code 8127 Mesa DR B206-148 Austin, TX 78759	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Construction		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: 33/69 Rpt: 37/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamon, Matthew <hr/> 6 Contributor address; City; State; Zip Code 2605 Enfield RD #217 Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Elected Official Staff		9 Employer (See Instructions) State of Texas
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landers, Stephanie <hr/> Contributor address; City; State; Zip Code 4507 House of Lancaster 0 Austin, TX 78730	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Landers Premier flooring
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landwermyer, John <hr/> Contributor address; City; State; Zip Code 2504 Guara DR 0 Cedar Park, TX 78613	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Arias & Associates, Inc.
Date 08/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lang, Thomas <hr/> Contributor address; City; State; Zip Code 8004 Asmara DR 0 Austin, TX 78750	Amount of Contribution (\$) \$50.00
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#: _____) Launius, Doug <hr/> Contributor address; City; State; Zip Code 3501 Cherry LN 0 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Marketplace RE Group

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/69 Rpt: 38/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/14/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LeBlanc, Eric <hr/> 6 Contributor address; City; State; Zip Code 2102 Exposition BLVD 0 Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Customer Success Director		9 Employer (See Instructions) Amazon
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lebakken, James <hr/> Contributor address; City; State; Zip Code 18917 Canyon Sage LN 0 Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales Executive		Employer (See Instructions) Dell Technologies
Date 08/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehman, Jeanine <hr/> Contributor address; City; State; Zip Code P. O. Box 202211 0 Austin, TX 78720	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Jeanine Lehman P.C.
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leslie, David <hr/> Contributor address; City; State; Zip Code 5957 Highland Hills DR E240-607 Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) MiloTree LLC
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Michael <hr/> Contributor address; City; State; Zip Code P. O. Box 146 0 Austin, TX 78767	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/69 Rpt: 39/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, John <hr/> 6 Contributor address; City; State; Zip Code 3839 Bee Cave RD Suite 204 Austin, TX 78746	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Investments		9 Employer (See Instructions) Self-Employed
Date 08/26/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Libert, Debra <hr/> Contributor address; City; State; Zip Code 5924 Northwest PL 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Christian <hr/> Contributor address; City; State; Zip Code 8705 Oakmountain CIR 0 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self-Employed
Date 09/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockhart, James <hr/> Contributor address; City; State; Zip Code P. O. Box 27187 0 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logue, Laurie <hr/> Contributor address; City; State; Zip Code 4814 Twin Valley DR 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Executive VP		Employer (See Instructions) Broadway Bank

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/69 Rpt: 40/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loven, William <hr/> 6 Contributor address; City; State; Zip Code 4110 Bunny Run #9 Austin, TX 78746	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Loven Enterprises
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lundquist, David <hr/> Contributor address; City; State; Zip Code 3929 Knollwood DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynd, Jeffrey <hr/> Contributor address; City; State; Zip Code P.O. Box162034 0 Austin, TX 78716	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) Self-Employed
Date 09/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyons, Camille <hr/> Contributor address; City; State; Zip Code 5715 Sam Houston CIR 0 Austin, TX 78731	Amount of Contribution (\$) \$250.00
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#: _____) Madden, Hamilton <hr/> Contributor address; City; State; Zip Code 1307 Elton LN 0 Austin, TX 78703	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Director of Investments		Employer (See Instructions) Sparrow Capital Partners

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/69 Rpt: 41/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maier, Richard <hr/> 6 Contributor address; City; State; Zip Code 704 East 45th 1/2 ST 0 Austin, TX 78751	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Lennar
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Sidney <hr/> Contributor address; City; State; Zip Code 6009 Tributary Ridge DR 0 Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Qualcomm
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Sidney <hr/> Contributor address; City; State; Zip Code 6009 Tributary Ridge DR 0 Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Qualcomm
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mansour, James <hr/> Contributor address; City; State; Zip Code 3824 Hunterwood PT 0 Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self-Employed
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mansour, Sarah <hr/> Contributor address; City; State; Zip Code 3824 Hunterwood PT 0 Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/69 Rpt: 42/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/19/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Randi <hr/> 6 Contributor address; City; State; Zip Code 2407 Westover RD 0 Austin, TX 78703	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Healer		9 Employer (See Instructions) Self-Employed
Date 09/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marquardt, David <hr/> Contributor address; City; State; Zip Code 1904 West Koenig LN 0 Austin, TX 78756	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) The Steam Team
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin-Clark, Janet <hr/> Contributor address; City; State; Zip Code 3634 Ranch Creek DR 0 Austin, TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Car Dealer and Tech Entrepreneur		Employer (See Instructions) Self-Employed
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin-Clark, Janet <hr/> Contributor address; City; State; Zip Code 3634 Ranch Creek DR 0 Austin, TX 78730	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Dealer		Employer (See Instructions) Self-Employed
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Clifford <hr/> Contributor address; City; State; Zip Code 10115 Dobbin DR 0 Austin, TX 78748	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Ben White Florist

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/69 Rpt: 43/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/01/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Joe <hr/> 6 Contributor address; City; State; Zip Code 11505 Juniper Ridge DR 0 Austin, TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Investigator		9 Employer (See Instructions) Retired
Date 09/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Marianne <hr/> Contributor address; City; State; Zip Code 30 Tall Oaks TRL 0 Austin, TX 78737	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#: _____) Mason, Mel <hr/> Contributor address; City; State; Zip Code 4526 Highland Terrace 0 Austin, TX 78731	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#: _____) Matthews, Lynn and Steve <hr/> Contributor address; City; State; Zip Code 3003 West 35th ST 0 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate, Law		Employer (See Instructions) Self-Employed
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matz, Laura <hr/> Contributor address; City; State; Zip Code 1708 Palma Plaza 0 Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Matz and Company, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/69 Rpt: 44/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/19/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maus, Gregory <hr/> 6 Contributor address; City; State; Zip Code 82 Brittany Farms RD Apt. 329 New Britain, CT 66053	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Mechanical Engineer		9 Employer (See Instructions) Energy Services
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCaig, Melody <hr/> Contributor address; City; State; Zip Code 2305 Woodlawn BLVD 0 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Stay at home mom		Employer (See Instructions) NA
Date 09/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClanahan, Jill <hr/> Contributor address; City; State; Zip Code 3218 Bridle Path 0 Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormack, John <hr/> Contributor address; City; State; Zip Code 1510 Rainbow BND 0 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Ashby <hr/> Contributor address; City; State; Zip Code 7303 Anaqua DR 0 Austin, TX 78750	Amount of Contribution (\$) \$199.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) AHM Enterprises Inc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/69 Rpt: 45/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/08/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKay, Thomas <hr/> 6 Contributor address; City; State; Zip Code 11339 Taylor Draper LN 0 Austin, TX 78759	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Machinist		9 Employer (See Instructions) Tom's Way, Inc.
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenzie, Kristi <hr/> Contributor address; City; State; Zip Code 2208 Forest TRL A Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMenamin, Gene <hr/> Contributor address; City; State; Zip Code 1821 Westlake DR Apt. 126 Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillian, Sherrell <hr/> Contributor address; City; State; Zip Code 7603 Midpark CT 0 Austin, TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Office Administrator		Employer (See Instructions) Crossfield Technology
Date 09/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mebane, Cheryl <hr/> Contributor address; City; State; Zip Code 3123 Eanes CIR 0 Austin, TX 78746	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Wedding Planner		Employer (See Instructions) Self-Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/69 Rpt: 46/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/28/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messner, Ken <hr/> 6 Contributor address; City; State; Zip Code 6702 Fireoak DR 0 Austin, TX 78759	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Programmer		9 Employer (See Instructions) DSI
Date 09/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mierl, Cara <hr/> Contributor address; City; State; Zip Code 4701 Greystone DR 0 Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self-Employed
Date 09/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milburn, Valerie <hr/> Contributor address; City; State; Zip Code 5302 Western Hills DR 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) NA
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mileur, Mason <hr/> Contributor address; City; State; Zip Code 2604 Hancock DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MD, Owner		Employer (See Instructions) Austin Medical Associates
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jeannine <hr/> Contributor address; City; State; Zip Code 1504 Pease RD 0 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/69 Rpt: 47/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/20/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Stephanie <hr/> 6 Contributor address; City; State; Zip Code 4723 Cat Mountain DR 0 Austin, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 08/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Laurie <hr/> Contributor address; City; State; Zip Code 9837 Westminster Glen 0 Austin, TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self-Employed
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morea, Lois <hr/> Contributor address; City; State; Zip Code 6112 Anemone CV 0 Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morea, Lois <hr/> Contributor address; City; State; Zip Code 6112 Anemone CV 0 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Sarah <hr/> Contributor address; City; State; Zip Code 5912 Inter Council CV 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/69 Rpt: 48/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mundy, Jeff <hr/> 6 Contributor address; City; State; Zip Code 3908 Pebble Path 0 Austin, TX 78731	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Lawyer & Shooting Instructor		9 Employer (See Instructions) The Mundy Firm PLLC
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munhofen, Brent <hr/> Contributor address; City; State; Zip Code 5719 Taylor Draper CV 0 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self-Employed
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munhofen, Brent <hr/> Contributor address; City; State; Zip Code 5719 Taylor Draper CV 0 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self-Employed
Date 09/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash, John <hr/> Contributor address; City; State; Zip Code 5818 Trailridge DR 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Ellis & Salazar
Date 09/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neff, Richard <hr/> Contributor address; City; State; Zip Code 11213 Amethyst TRL 0 Austin, TX 78750	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Hunt

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/69 Rpt: 49/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/16/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newberry, Diane <hr/> 6 Contributor address; City; State; Zip Code 3801 Green Trls N 0 Austin, TX 78731	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Admin Asst		9 Employer (See Instructions) AISD
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nunnally, Rex <hr/> Contributor address; City; State; Zip Code 3431 N Hills DR Apt. 210 Austin, TX 78731	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogden, Susan <hr/> Contributor address; City; State; Zip Code 2302 W 10th ST 0 Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Landlord		Employer (See Instructions) Self-Employed
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oprendek, Stephen <hr/> Contributor address; City; State; Zip Code 6606 Strutton CV 0 Austin, TX 78759	Amount of Contribution (\$) \$100.00
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#: _____) Orbach, Raymond <hr/> Contributor address; City; State; Zip Code 4004 Petra Path 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physics Professor		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/69 Rpt: 50/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/18/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Overesch, William <hr/> 6 Contributor address; City; State; Zip Code 1800 Bremen ST 0 Austin, TX 78703	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Environmental Consultant		9 Employer (See Instructions) Tetra Tech
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Wade <hr/> Contributor address; City; State; Zip Code 7200 Montana Norte 0 Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) insurance agent		Employer (See Instructions) Environmental Insurance Service
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parish, Russell <hr/> Contributor address; City; State; Zip Code 6801 Beatty DR 0 Austin, TX 78749	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Parish & Wright Law Firm
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Patricia <hr/> Contributor address; City; State; Zip Code 1508 Emperor CT 0 Round Rock, TX 78664	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions) Retired
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Thomas <hr/> Contributor address; City; State; Zip Code 6712B Valburn DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/69 Rpt: 51/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrillo, Louis <hr/> 6 Contributor address; City; State; Zip Code 5304 Park Hollow LN 0 Austin, TX 78746	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Technology Executive		9 Employer (See Instructions) Self-Employed
Date 08/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Bradley <hr/> Contributor address; City; State; Zip Code 3706 Greystone DR 0 Austin, TX 78731	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#: _____) Parsons, Bradley <hr/> Contributor address; City; State; Zip Code 3706 Greystone DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Bradley <hr/> Contributor address; City; State; Zip Code 3706 Greystone DR 0 Austin, TX 78732	Amount of Contribution (\$) \$100.00
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#: _____) Parsons, Bradley <hr/> Contributor address; City; State; Zip Code 3706 Greystone DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/69 Rpt: 52/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/20/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Carolyn <hr/> 6 Contributor address; City; State; Zip Code 3706 Greystone DR 0 Austin, TX 78731	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Donald <hr/> Contributor address; City; State; Zip Code 3706 Greystone DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Donald <hr/> Contributor address; City; State; Zip Code 3706 Greystone DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
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#: _____) Parsons, Roy <hr/> Contributor address; City; State; Zip Code 7206 Waterline RD 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Senior Director, Services PMO		Employer (See Instructions) Dell Technologies
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patten, Buddy <hr/> Contributor address; City; State; Zip Code 210 Lavaca ST Unit 3406 Austin, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/69 Rpt: 53/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/10/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Gary 6 Contributor address; City; State; Zip Code 5400 Montview ST 0 Austin, TX 78756	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Enviroplan Architects
Date 09/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearce, Stephen Contributor address; City; State; Zip Code 400 Lake Cliff TRL 0 Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Orthopedic Surgeon		Employer (See Instructions) OACT
Date 08/26/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peloquen, Jenny Contributor address; City; State; Zip Code 5705 Jamboree CT 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Other		Employer (See Instructions) Self-Employed
Date 08/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pempsell, Paul Contributor address; City; State; Zip Code 8227 Summer Side DR 0 Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self-Employed
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pensock, Teresa Contributor address; City; State; Zip Code 7301 Barley CV 0 Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/69 Rpt: 54/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/30/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peo, Marc <hr/> 6 Contributor address; City; State; Zip Code 6 Olde York RD 0 Randolph, NJ 77869	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Heller Industries
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Greg <hr/> Contributor address; City; State; Zip Code 1306 Meriden LN 0 Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Software		Employer (See Instructions) Zilliant, Inc.
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Barbra "Frances Scott" <hr/> Contributor address; City; State; Zip Code 3202 Hancock DR 0 Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Video Production/Voice-Over/Hosting/Consulting		Employer (See Instructions) Self-Employed
Date 09/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Joy <hr/> Contributor address; City; State; Zip Code 6206 Blarwood DR 0 Austin, TX 78745	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pisano, Pie <hr/> Contributor address; City; State; Zip Code 240 Bushnell AVE 0 San Antonio, TX 78212	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) YMCA		Employer (See Instructions) Fitness

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/69 Rpt: 55/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/07/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitts, Andy <hr/> 6 Contributor address; City; State; Zip Code 1754 Bagdad RD Bldg. 100A Cedar Park, TX 78613	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Titanium Payments
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prevratil, Joseph <hr/> Contributor address; City; State; Zip Code 11902 Buckingham RD 0 Austin, TX 78759	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Systems Admin		Employer (See Instructions) State of Texas
Date 08/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prevratil, Scott <hr/> Contributor address; City; State; Zip Code 11902 Buckingham RD 0 Austin, TX 78759	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Systems Admin		Employer (See Instructions) State of Texas
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prideaux, Brannin <hr/> Contributor address; City; State; Zip Code 4106 Honeycomb Rock CIR 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired-Investor-Consultant		Employer (See Instructions) Self-Employed
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prideaux, Nancy <hr/> Contributor address; City; State; Zip Code 4106 Honeycomb Rock CIR 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired - Volunteer		Employer (See Instructions) Retired - Volunteer

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/69 Rpt: 56/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/19/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pugh, Randall <hr/> 6 Contributor address; City; State; Zip Code 3506 Windsor RD 0 Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radford, Martha <hr/> Contributor address; City; State; Zip Code 11602 Sweetshade LN 0 Austin, TX 78759	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Joel & Laurel <hr/> Contributor address; City; State; Zip Code 6706 Winnipeg CV 0 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeder, Alan <hr/> Contributor address; City; State; Zip Code 5903 Woodview AVE 0 Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Outdoor Advertising		Employer (See Instructions) NA
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reese, Jason <hr/> Contributor address; City; State; Zip Code 2405 West 9th ST 0 Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Sales VP		Employer (See Instructions) VMWare

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/69 Rpt: 57/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/07/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, D. K. <hr/> 6 Contributor address; City; State; Zip Code 815 Brazos ST Suite 606 Austin, TX 78701	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Reynolds Insurance
Date 08/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Mike <hr/> Contributor address; City; State; Zip Code 4009 Sabio DR #164 Austin, TX 78749	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self-Employed
Date 09/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ridgeway, Jeff <hr/> Contributor address; City; State; Zip Code 5816 Gentle Breeze TER 0 Austin, TX 78731	Amount of Contribution (\$) \$199.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Owen <hr/> Contributor address; City; State; Zip Code 3405 Monte Vista DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roche, Becky <hr/> Contributor address; City; State; Zip Code 1600 Mount Larson RD 0 Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/69 Rpt: 58/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roche, David <hr/> 6 Contributor address; City; State; Zip Code 1600 Mount Larson RD 0 Austin, TX 78746	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Leigh Ann <hr/> Contributor address; City; State; Zip Code 4739 Cat Mountain DR 0 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Wife of Reserve Naval Officer and EVP		Employer (See Instructions) NA
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roye, Walter <hr/> Contributor address; City; State; Zip Code 6500 Cuesta TRL 0 Austin, TX 78730	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self-Employed
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubin, Christina <hr/> Contributor address; City; State; Zip Code 8011 Cardin DR 0 Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired Registered Nurse		Employer (See Instructions) NA
Date 09/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russo, Tony R. <hr/> Contributor address; City; State; Zip Code 2401 West Pecan ST 103 Pflugerville, TX 78660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Health		Employer (See Instructions) Self-Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/69 Rpt: 59/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/20/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruwwe, Lacy <hr/> 6 Contributor address; City; State; Zip Code 6205 Edwards Mountain CV 0 Austin, TX 78731	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Geologist		9 Employer (See Instructions) Self-Employed
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryder, James <hr/> Contributor address; City; State; Zip Code 2805 Robbs Run 0 Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Data Processing and Web Site Creator		Employer (See Instructions) JSR Systems
Date 08/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanderson, Graham <hr/> Contributor address; City; State; Zip Code 3704 Weatherhill CV 0 Austin, TX 78730	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Vast		Employer (See Instructions) Datablocks
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanderson, Graham <hr/> Contributor address; City; State; Zip Code 3704 Weatherhill CV 0 Austin, TX 78730	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software		Employer (See Instructions) Datablocks
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sass, Stacy <hr/> Contributor address; City; State; Zip Code 6116 Rickey DR 0 Austin, TX 78757	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Cody Builders Supply, Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/69 Rpt: 60/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/19/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauder, John <hr/> 6 Contributor address; City; State; Zip Code 3215 Exposition DR B-22 Austin, TX 78703	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Investments		9 Employer (See Instructions) 3000 Partners LLC
Date 09/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaffner, Tim <hr/> Contributor address; City; State; Zip Code 2602 Top CV 0 Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, James <hr/> Contributor address; City; State; Zip Code 3203 Greenlee DR 0 Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) J R Schneider Construction
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, Scott <hr/> Contributor address; City; State; Zip Code 202 Nueces ST Unit 1603 Austin, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Train Our Troops
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schram, Elise <hr/> Contributor address; City; State; Zip Code 1408 Hardouin AVE 0 Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Tarrytown Expocare Pharmacy

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/69 Rpt: 61/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/18/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwant, Neil 6 Contributor address; City; State; Zip Code 5308 Dry Wells 0 Austin, TX 78749	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaquist, Jack Contributor address; City; State; Zip Code 2602 Velasquez DR 0 Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) Retired
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shah, Sandeep Contributor address; City; State; Zip Code 7804 Texas Plume RD 0 Austin, TX 78759	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Radiologist		Employer (See Instructions) Austin Radiological Association
Date 09/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shanks, Ashley Contributor address; City; State; Zip Code 1417 Westover RD 0 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) NA
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharplin, Sylvia Contributor address; City; State; Zip Code 1105 West 10th ST 0 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate Investments		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/69 Rpt: 62/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Cydney <hr/> 6 Contributor address; City; State; Zip Code 4501 Balcones DR 0 Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) HSMinerals
Date 08/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, John <hr/> Contributor address; City; State; Zip Code 2314 Enfield RD Unit 200 Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self-Employed
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skaggs, Betty <hr/> Contributor address; City; State; Zip Code 4700 Toreador DR 0 Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skaggs, Jim <hr/> Contributor address; City; State; Zip Code 4700 Toreador DR 0 Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skowbo, James <hr/> Contributor address; City; State; Zip Code 310 Mustang Way 0 Georgetown, TX 78633	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/69 Rpt: 63/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/19/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jare <hr/> 6 Contributor address; City; State; Zip Code 4200 Jackson AVE Apt. 4015 Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Julianne <hr/> Contributor address; City; State; Zip Code 10604 La Plata CV 0 Austin, TX 78737	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, William <hr/> Contributor address; City; State; Zip Code 8141 Jester BLVD 0 Austin, TX 78750	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorensen, David <hr/> Contributor address; City; State; Zip Code P. O. Box 26831 0 Austin, TX 78755	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Retired
Date 09/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spence, Sarah <hr/> Contributor address; City; State; Zip Code 4315 Charlemagne CT 0 Austin, TX 78727	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Home School

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/69 Rpt: 64/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanton, Robert <hr/> 6 Contributor address; City; State; Zip Code 9912 Brightling LN 0 Austin, TX 78750	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Pilot		9 Employer (See Instructions) Retired
Date 09/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Jonathan <hr/> Contributor address; City; State; Zip Code 4712 Paraiso PKWY 0 Austin, TX 78738	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Kendra <hr/> Contributor address; City; State; Zip Code 4712 Paraiso PKWY 0 Austin, TX 78738	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) N/A
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stout, Stephen <hr/> Contributor address; City; State; Zip Code 98 San Jacinto BLVD FSR 1203 Austin, TX 78701	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Private Equity / Investment Banking		Employer (See Instructions) Proton Partners
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strickland, Mark <hr/> Contributor address; City; State; Zip Code 8617 Silver Ridge DR 0 Austin, TX 78759	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) UiPath

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/69 Rpt: 65/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/10/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strickland, Robin <hr/> 6 Contributor address; City; State; Zip Code 8617 Silver Ridge DR 0 Austin, TX 78759	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Housewife		9 Employer (See Instructions) None
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swank, Shannon <hr/> Contributor address; City; State; Zip Code 6906 Rudi CV 0 Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Chief Marketing Officer		Employer (See Instructions) PlusPass, Inc.
Date 08/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tate, Drew <hr/> Contributor address; City; State; Zip Code 2630 Exposition BLVD Suite 115 Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate Broker / Developer		Employer (See Instructions) Tate Property
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templeton, James <hr/> Contributor address; City; State; Zip Code 8000 Havenwood DR 0 Ausstin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templeton, Laura <hr/> Contributor address; City; State; Zip Code 5802 Lookout Mountain DR 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Advertising Consultant		Employer (See Instructions) Austin Fit

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/69 Rpt: 66/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/29/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Jan <hr/> 6 Contributor address; City; State; Zip Code 6204 Mountain Villa DR 0 Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, A. Leon <hr/> Contributor address; City; State; Zip Code 1301 S. Capital of Texas HWY #A234 Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Thompson Properties
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Topfer, Richard <hr/> Contributor address; City; State; Zip Code 3205 Rain Dance CV 0 Austin, TX 78746	Amount of Contribution (\$) \$199.00
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) Castletop Capital
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tremmel, Steve <hr/> Contributor address; City; State; Zip Code 8405 Horse Mountain CV 0 Austin, TX 78759	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trujillo, Sandy <hr/> Contributor address; City; State; Zip Code 3809 Spicewood Springs RD #137 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/69 Rpt: 67/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/05/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trull, Scott <hr/> 6 Contributor address; City; State; Zip Code 3704 Eastledge DR 0 Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker II, Paul <hr/> Contributor address; City; State; Zip Code 4508 Peralta LN 0 Austin, TX 78735	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) MD
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Benjamin <hr/> Contributor address; City; State; Zip Code 11909 Arch Hill DR 0 Austin, TX 78750	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van London, Eric <hr/> Contributor address; City; State; Zip Code 6920 Cat Creek Run 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self-Employed
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanderPloeg, Juliet <hr/> Contributor address; City; State; Zip Code 4301 Lostridge DR 0 Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/69 Rpt: 68/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/02/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vezina, John <hr/> 6 Contributor address; City; State; Zip Code 4402 Deepwoods DR 0 Austin, TX 78731	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) VP of Sales		9 Employer (See Instructions) HealthiPass
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincet, Theresa <hr/> Contributor address; City; State; Zip Code 3711 Hidden Hollow 0 Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 08/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virden, Norma <hr/> Contributor address; City; State; Zip Code 8046 Crestview DR 0 Des Moines, IA 50320	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Child Support Recovery		Employer (See Instructions) State of Iowa
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddle, Conni <hr/> Contributor address; City; State; Zip Code 6904 Deepwood DR 0 Lago Vista, TX 78645	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Office Mgr.		Employer (See Instructions) Energy Feeds International
Date 09/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Jay <hr/> Contributor address; City; State; Zip Code 3405 Mountain Top CIR 0 Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Me		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/69 Rpt: 69/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/11/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Kirby 6 Contributor address; City; State; Zip Code 801 C-Bar Ranch TRL #2050C Cedar Park, TX 78613	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Restaurant Managment		9 Employer (See Instructions) Niks Kitchen + Bar
Date 09/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Margaret Contributor address; City; State; Zip Code 4408 Long Champ DR Apt. 26 Austin, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self-Employed
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Roy Contributor address; City; State; Zip Code 10802 Catthorn CV 0 Austin, TX 78759	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Wayne Contributor address; City; State; Zip Code 5625 Spurflower DR 0 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Charlotte Contributor address; City; State; Zip Code 5405 Western Hills DR 0 Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/69 Rpt: 70/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/19/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Benjamin <hr/> 6 Contributor address; City; State; Zip Code 5901 Saratoga CV 0 Austin, TX 78746	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) BHW Operating Co LP
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welp, Mark <hr/> Contributor address; City; State; Zip Code 7108 Barefoot CV 0 Austin, TX 78730	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Emily <hr/> Contributor address; City; State; Zip Code 11406 Charred Oak DR 0 Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, James <hr/> Contributor address; City; State; Zip Code 11408 Ohmfield CT 0 Austin, TX 78739	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-Employed
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, James <hr/> Contributor address; City; State; Zip Code 11408 Ohmfield CT 0 Austin, TX 78739	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/69 Rpt: 71/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/05/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rogers <hr/> 6 Contributor address; City; State; Zip Code 4210 Spicewood Springs RD Suite 103 Austin, TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> Contributor address; City; State; Zip Code 11742 D-K Ranch RD 0 Austin, TX 78759	Amount of Contribution (\$) \$50.00
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#: _____) Winegar, Steven <hr/> Contributor address; City; State; Zip Code 4615 Crestway DR 0 Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Terry McDaniel & Co.
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wirt, Kathy <hr/> Contributor address; City; State; Zip Code 110 Parkwood CT 0 West Lake Hills, TX 78746	Amount of Contribution (\$) \$200.00
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#: _____) Wisthuff, Linda <hr/> Contributor address; City; State; Zip Code 6817 Via Correto DR 0 Austin, TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self-Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/69 Rpt: 72/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/18/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wisthuff, Linda <hr/> 6 Contributor address; City; State; Zip Code 6817 Via Correto DR 0 Austin, TX 78749	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Real Estate Broker		9 Employer (See Instructions) Self-Employed
Date 09/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> Contributor address; City; State; Zip Code 5002 Sevan CV 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Ellen <hr/> Contributor address; City; State; Zip Code 5002 Sevan CV 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) vcfo, Inc.
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, John <hr/> Contributor address; City; State; Zip Code 4511 Island CV 0 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) TrainATech
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodmansee, James <hr/> Contributor address; City; State; Zip Code 3571 Far West BLVD Suite 131 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales		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: 69/69 Rpt: 73/92
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/16/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yenzer, Drew <hr/> 6 Contributor address; City; State; Zip Code 7516a Colina Vista Loop 0 Austin, TX 78750	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 09/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yenzer, Drew <hr/> Contributor address; City; State; Zip Code 7516a Colina Vista Loop 0 Austin, TX 78750	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 09/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmermann, Keith <hr/> Contributor address; City; State; Zip Code 6006 Danwood DR 0 Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) Z-Environmental

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: 74/92	
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 09/17/2020	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardage, Lori	8 Amount of contribution (\$) \$150.00	9 In-kind contribution description Embroidered ball caps and shirts.
7 Contributor address; City; State; Zip Code 2267 FM 141 Giddings, TX 78942		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Embroider Shop Owner		11 Employer (FOR NON-JUDICIAL) (See instructions) Self-Employed	
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 08/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virden, Savannah	Amount of contribution (\$) \$400.00	In-kind contribution description Website Design
Contributor address; City; State; Zip Code 1212 Castle Hill ST Unit 11 Austin, TX 78703		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Website Designer		Employer (FOR NON-JUDICIAL) (See instructions) Self-Employed	
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)			

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
Sch: 1/1 Rpt: 75/92

2 FILER NAME
Virden, Jennifer M

3 Filer ID (Ethics Commission Filers)
00090501

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan
09/23/2020

7 Name of lender ☐ out-of-state PAC (ID#: _____)
Virden, Jennifer

9 Loan Amount (\$)
\$50,000.00

6 Is lender a
financial
institution?
No

8 Lender address; City; State; Zip Code
8307 High Oak DR
Austin, TX 78759

10 Interest Rate
0.00

11 Maturity Date
12/15/2020

12 Principal occupation / Job title (See Instructions)
Real Estate Broker

13 Employer (See Instructions)
Self-Employed/AustinHaus Realty & Restorations, LLC

14 Description of Collateral
☒ None

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

16 GUARANTOR
INFORMATION
☒ not applicable

17 Name of guarantor
.....
18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed (\$)

20 Principal occupation

21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/13 Rpt: 76/92	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/23/2020	5 Payee name Amazon	
6 Amount (\$) \$128.82	7 Payee address; City; State; Zip Code 410 Terry AVE N Seattle, WA 98109	
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 Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2020	Payee name Amazon	
Amount (\$) \$43.29	Payee address; City; State; Zip Code 410 Terry AVE N Seattle, WA 98109	
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 Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/20/2020	Payee name Bluebird Crossing Designs	
Amount (\$) \$470.00	Payee address; City; State; Zip Code 2267 FM 141 Giddings, TX 78942	
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 Custom Ball Caps
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: 2/13 Rpt: 77/92	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/20/2020	5 Payee name Brooks, Matthew	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 1908 Dry Creek DR Round Rock, TX 78681	
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 Photography
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2020	Payee name Bumpersticker.com	
Amount (\$) \$216.50	Payee address; City; State; Zip Code 612 W. 34th ST Austin, TX 78705	
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 Signs and Stickers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/24/2020	Payee name Bumpersticker.com	
Amount (\$) \$240.81	Payee address; City; State; Zip Code 612 W. 34th ST Austin, TX 78705	
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 Signs and Stickers
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: 3/13 Rpt: 78/92	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/24/2020	5 Payee name Bumpersticker.com	
6 Amount (\$) \$815.12	7 Payee address; City; State; Zip Code 612 W. 34th ST Austin, TX 78705	
8 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 Signs and Stickers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2020	Payee name Constant Contact	
Amount (\$) \$101.27	Payee address; City; State; Zip Code 1601 Trapelo RD Waltham, MA 02451	
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 Contact Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/18/2020	Payee name Constant Contact	
Amount (\$) \$74.62	Payee address; City; State; Zip Code 1601 Trapelo RD Waltham, MA 02451	
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 Contact Subscription
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: 4/13 Rpt: 79/92	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/23/2020	5 Payee name Daily Juice	
6 Amount (\$) \$18.46	7 Payee address; City; State; Zip Code 3720 Far West BLVD Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/22/2020	Candidate/Officeholder name Office sought Office held	
Payee name Daily Juice		
Amount (\$) \$22.19	Payee address; City; State; Zip Code 3720 Far West BLVD Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/24/2020	Candidate/Officeholder name Office sought Office held	
Payee name DonateWay		
Amount (\$) \$2,216.59	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		

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: 5/13 Rpt: 80/92	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/04/2020	5 Payee name Dragonfly Digital	
6 Amount (\$) \$420.00	7 Payee address; City; State; Zip Code 3220 Duval RD Austin, TX 78759	
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 Signs and Stickers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/02/2020	Payee name Flanagan, Karen	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 12301 Bar X DR Austin, TX 78727	
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 Contractor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2020	Payee name KLBj	
Amount (\$) \$1,920.00	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) 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 Political Ad
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: 6/13 Rpt: 81/92	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/08/2020	5 Payee name KLBj	
6 Amount (\$) \$1,275.00	7 Payee address; City; State; Zip Code 8309 N. IH 35 Austin, TX 78753	
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 Political Ad
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/14/2020	Payee name KLBj	
Amount (\$) \$930.00	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) 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 Political Ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2020	Payee name KOKE	
Amount (\$) \$1,860.00	Payee address; City; State; Zip Code 912 S. Capital of TX HWY Austin, TX 78759	
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 Political Ad
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: 7/13 Rpt: 82/92	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/02/2020	5 Payee name Office Depot	
6 Amount (\$) \$321.21	7 Payee address; City; State; Zip Code 2620 W. Anderson LN Austin, TX 78757	
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 Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/16/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$160.33	Payee name Office Depot Payee address; City; State; Zip Code 2620 W. Anderson LN Austin, TX 78757	
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 Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/22/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$216.56	Payee name Office Depot Payee address; City; State; Zip Code 2620 W. Anderson LN Austin, TX 78757	
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 Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/13 Rpt: 83/92	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/13/2020	5 Payee name Office Depot	
6 Amount (\$) \$278.27	7 Payee address; City; State; Zip Code 2620 W. Anderson LN Austin, TX 78757	
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 Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/24/2020	Candidate/Officeholder name Office sought Office held	
Payee name Office Depot		
Amount (\$) \$83.12	Payee address; City; State; Zip Code 2620 W. Anderson LN Austin, TX 78757	
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 Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/12/2020	Candidate/Officeholder name Office sought Office held	
Payee name Pueblo Group Consulting LLC		
Amount (\$) \$1,730.00	Payee address; City; State; Zip Code 2810 Salado ST Austin, TX 78705	
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 Social Media
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/13 Rpt: 84/92	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/19/2020	5 Payee name Pueblo Group Consulting LLC	
6 Amount (\$) \$180.00	7 Payee address; City; State; Zip Code 2810 Salado ST Austin, TX 78705	
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 Social Media
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/19/2020	Payee name Saucedo, David	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 7239 Carriage Fern San Antonio, TX 78249	
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 Photography
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/12/2020	Payee name Super Cheap Signs	
Amount (\$) \$1,064.00	Payee address; City; State; Zip Code 612 W. 34th ST Austin, TX 78705	
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 Signs and Stickers
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: 10/13 Rpt: 85/92	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/12/2020	5 Payee name Super Cheap Signs	
6 Amount (\$) \$289.90	7 Payee address; City; State; Zip Code 612 W. 34th ST Austin, TX 78705	
8 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 Signs and Stickers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/16/2020	Payee name Super Cheap Signs	
Amount (\$) \$227.00	Payee address; City; State; Zip Code 9200 Waterford Centre BLVD. Austin, TX 78759	
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 Signs and Stickers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/16/2020	Payee name Super Cheap Signs	
Amount (\$) \$985.50	Payee address; City; State; Zip Code 9200 Waterford Centre BLVD. Austin, TX 78759	
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 Signs and Stickers
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: 11/13 Rpt: 86/92	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/16/2020	5 Payee name Super Cheap Signs	
6 Amount (\$) \$284.00	7 Payee address; City; State; Zip Code 9200 Waterford Centre BLVD. Austin, TX 78759	
8 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 Signs and Stickers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/16/2020	Candidate/Officeholder name Office sought Office held	
Payee name Super Cheap Signs		
Amount (\$) \$1,798.00	Payee address; City; State; Zip Code 9200 Waterford Centre BLVD. 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 Signs and Stickers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/21/2020	Candidate/Officeholder name Office sought Office held	
Payee name Super Cheap Signs		
Amount (\$) \$1,196.80	Payee address; City; State; Zip Code 9200 Waterford Centre BLVD. 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 Signs and Stickers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/13 Rpt: 87/92	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/21/2020	5 Payee name Super Cheap Signs	
6 Amount (\$) \$174.00	7 Payee address; City; State; Zip Code 9200 Waterford Centre BLVD. Austin, TX 78759	
8 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 Signs and Stickers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/20/2020	Payee name Vera, Bobby	
Amount (\$) \$1,292.50	Payee address; City; State; Zip Code 130 Niven Path Jarrell, TX 76537	
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 Contact Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/13/2020	Payee name Vertical Contact	
Amount (\$) \$127.92	Payee address; City; State; Zip Code 3680 Victoria ST N Shoreview, MN 55126-2966	
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 Contact Subscription
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: 13/13 Rpt: 88/92	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/23/2020	5 Payee name Waterloo Media	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 8309 N. IH 35 Austin, TX 78753	
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 Political Ad
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2020	Payee name Waterloo Media	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 8309 N. IH 35 Austin, TX 02451	
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 Political Ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/2 Rpt: 89/92	2 FILER NAME Virden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date 08/21/2020	6 Payee name Drop Box	
7 Amount (\$) \$127.79	8 Payee address; City; State; Zip Code 501 Congress AVE Austin, TX 78701	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Office Supplies
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/23/2020	Payee name Quickbooks	
Amount (\$) \$13.33	Payee address; City; State; Zip Code 2700 Coast AVE Mountain View, CA 94043-1140	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
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 Accounting Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/2 Rpt: 90/92	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date 09/23/2020	6 Payee name Quickbooks	
7 Amount (\$) \$13.33	8 Payee address; City; State; Zip Code 2700 Coast AVE Mountain View, CA 94043-1140	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Accounting Software
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/2 Rpt: 91/92	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/17/2020	5 Payee name City of Austin	
6 Amount (\$) \$5.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 301 W. 2nd ST Austin, TX 78701	
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 Parking
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/17/2020	Payee name Office of the City Clerk	
Amount (\$) \$500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 301 W. 2nd ST Suite 1120 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/17/2020	Payee name Roy Jones, Notary	
Amount (\$) \$20.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code Not Available Austin, TX 78759	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Notary Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/2 Rpt: 92/92		2 FILER NAME Viriden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501	
4 Date 08/24/2020		5 Payee name The UPS Store			
6 Amount (\$) \$200.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 8127 Mesa DR Suite B206 Austin, TX 78759			
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 Post Office Box Rental	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/24/2020		Payee name UFCU			
Amount (\$) \$5.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 3305 Steck AVE Austin, TX 78757			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee to Open Acct.	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/24/2020		Payee name Viriden, Jennifer			
Amount (\$) \$505.95 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 8307 High Oak DR Austin, TX 78759			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Loaded debit card for office expenses: \$500 Loaded + \$5.95 Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	