

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) 00090757		2 Total pages filed: 16	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Monica A.		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 12/27/2021		
	NICKNAME LAST SUFFIX Guzman				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE PO Box 180883 Austin, TX 78751-0883		Date Hand-delivered or Date Postmarked		
			Receipt # Amount		
			Date Processed		
			Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Randall E.				
	NICKNAME LAST SUFFIX Teich				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 9201 Quail Hill Cir Austin, TX 78758				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 426-7769				
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 11/22/2021 12/26/2021				
10 ELECTION	ELECTION DATE Month Day Year 01/25/2022		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input checked="" type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Council Member, District 4 Place Austin District 4		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Guzman, Monica A.	14 Filer ID (Ethics Commission Filers) 00090757
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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)	\$ 3,853.33
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,039.50
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,773.83
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 100.00

17 AFFADAVIT		
<p>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.</p> <div style="display: flex; justify-content: center; align-items: center;"><div style="text-align: center; margin-right: 20px;">Monica A. Guzman</div><div style="border-top: 1px solid black; width: 400px;"></div></div> <p style="text-align: center;">Signature of Candidate or Officeholder</p>		
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 Guzman, Monica A.		19 Filer ID (Ethics Commission Filers) 00090757
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,853.33
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 100.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 988.50
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 51.00
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: 1/8 Rpt: 4/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 12/20/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Chris <hr/> 6 Contributor address; City; State; Zip Code 1406 W 39th 1/2 St Austin, TX 78756	7 Amount of Contribution (\$) \$52.95
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Self-employed
Date 12/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Josephine <hr/> Contributor address; City; State; Zip Code 8124 Forshey St New Orleans, LA 70118	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Linda <hr/> Contributor address; City; State; Zip Code 4104 Turkey Creek Dr Austin, TX 78730	Amount of Contribution (\$) \$210.84
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Austin Neighborhood Organization
Date 12/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blue, Sally <hr/> Contributor address; City; State; Zip Code 4701 Staggerbrush Rd Apt 428 Austin, TX 78749	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Transitions Coach and Consultant		Employer (See Instructions) Sally Blue Consulting
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Garry <hr/> Contributor address; City; State; Zip Code 3802 Hawkshead Dr Austin, TX 78727	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) Williamson County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/8 Rpt: 5/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 12/21/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchholtz, Patricia <hr/> 6 Contributor address; City; State; Zip Code 4025 Camacho St Austin, TX 78723	7 Amount of Contribution (\$) \$105.58
8 Principal occupation / Job title (See Instructions) Co-Founder and Partner		9 Employer (See Instructions) lookthinkmake
Date 12/26/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burleson, John <hr/> Contributor address; City; State; Zip Code 5201 English Glade Dr Austin, TX 78724	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Senior QA		Employer (See Instructions) Accenture
Date 12/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Brandi <hr/> Contributor address; City; State; Zip Code 4509 Sinclair Ave Austin, TX 78756	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Environmentality Inc
Date 12/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calderón, Sara <hr/> Contributor address; City; State; Zip Code 6304 Libyan Dr Austin, TX 78745	Amount of Contribution (\$) \$21.37
Principal occupation / Job title (See Instructions) Founder & CEO		Employer (See Instructions) TerceraDev
Date 11/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denkler, Ann <hr/> Contributor address; City; State; Zip Code 6112 Highlandale Dr Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions) Travis County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/8 Rpt: 6/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 12/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, James <hr/> 6 Contributor address; City; State; Zip Code 11405 Pradera Dr Austin, TX 78759	7 Amount of Contribution (\$) \$421.37
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garay, Ricardo <hr/> Contributor address; City; State; Zip Code 561 Bridgestone Way Buda, TX 78610	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Dell Medical School
Date 12/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Jaime <hr/> Contributor address; City; State; Zip Code 5700 Terravista Dr Austin, TX 78735	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Extend-a-Care YMCA
Date 12/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaven, Glenn <hr/> Contributor address; City; State; Zip Code 5730B Wellington Dr Austin, TX 78723	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) Bill Doran Company
Date 12/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glenn, Christine <hr/> Contributor address; City; State; Zip Code 1701 Springlake Dr Dripping Springs, TX 78620	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Principal Coach & Organizational Designer		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: 4/8 Rpt: 7/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 12/06/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guzmán, Michele <hr/> 6 Contributor address; City; State; Zip Code 3207 Benbrook Dr Austin, TX 78757	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) TriWest Group
Date 12/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guzmán, Peter <hr/> Contributor address; City; State; Zip Code 8605 Shoal Creek Blvd Apt 125 Austin, TX 78757	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Education Consultant		Employer (See Instructions) College InRoads
Date 12/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, David <hr/> Contributor address; City; State; Zip Code 1808 Kerr St Austin, TX 78704	Amount of Contribution (\$) \$368.74
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiolbassa, Jolene <hr/> Contributor address; City; State; Zip Code 3007 West Ave Austin, TX 78705	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Llanes Pulido, Carmen <hr/> Contributor address; City; State; Zip Code 4513 Elwood Rd Austin, TX 78722	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) GAVA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/8 Rpt: 8/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 12/23/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucio, Ricardo <hr/> 6 Contributor address; City; State; Zip Code 1101 Rio Hondo Rd Harlingen, TX 78550	7 Amount of Contribution (\$) \$26.63
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McArthur, Barbara <hr/> Contributor address; City; State; Zip Code 5700 Clay Ave Austin, TX 78756	Amount of Contribution (\$) \$31.89
Principal occupation / Job title (See Instructions) Research Affiliate		Employer (See Instructions) UT Austin
Date 12/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mejia, Michelle <hr/> Contributor address; City; State; Zip Code 2018 W Rundberg Ln Apt 7B Austin, TX 78748	Amount of Contribution (\$) \$31.89
Principal occupation / Job title (See Instructions) Early Childhood Health Equity Organizer		Employer (See Instructions) GAVA
Date 12/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitcham, Gail <hr/> Contributor address; City; State; Zip Code 8400 Jamestown Dr Apt 428 Austin, TX 78758	Amount of Contribution (\$) \$58.21
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Laura <hr/> Contributor address; City; State; Zip Code 225 Drury Ln Austin, TX 78737	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Organizing Director		Employer (See Instructions) GAVA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/8 Rpt: 9/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 12/16/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perryman, Bryan <hr/> 6 Contributor address; City; State; Zip Code 11300 Ptarmigan Cv Austin, TX 78758	7 Amount of Contribution (\$) \$42.42
8 Principal occupation / Job title (See Instructions) Driver/Assistant		9 Employer (See Instructions) Perryman Group
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polunsky, Steven <hr/> Contributor address; City; State; Zip Code 8006 Meadowlake Drive W Northport, AL 35473	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Director, Transportation Policy Research Center		Employer (See Instructions) Alabama Transportation Institute
Date 12/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pry, Patricia <hr/> Contributor address; City; State; Zip Code 907 Hermitage Dr Austin, TX 78753	Amount of Contribution (\$) \$42.42
Principal occupation / Job title (See Instructions) Co-Owner		Employer (See Instructions) Elevate Bartending
Date 12/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Gilbert <hr/> Contributor address; City; State; Zip Code 1000 Glen Oaks Ct Austin, TX 78702	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Jessica <hr/> Contributor address; City; State; Zip Code 106 Red Oak St S Weatherford, TX 76087	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Field Organizer		Employer (See Instructions) Greg Casar for Congress

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/8 Rpt: 10/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 12/15/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sager, Jessica <hr/> 6 Contributor address; City; State; Zip Code 5203 Hedgewood Dr Austin, TX 78745	7 Amount of Contribution (\$) \$52.95
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) JHS Coaching and Consulting
Date 12/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shah, Samir <hr/> Contributor address; City; State; Zip Code 8716 Little Laura Dr Austin, TX 78757	Amount of Contribution (\$) \$211.89
Principal occupation / Job title (See Instructions) Chief Marketing Officer		Employer (See Instructions) Khaana Marketing
Date 12/05/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solis, Maria <hr/> Contributor address; City; State; Zip Code PO Box 41504 Austin, TX 78704	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Care Coordinator		Employer (See Instructions) El Buen Samaritano
Date 12/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teich, Ann <hr/> Contributor address; City; State; Zip Code 9201 Quail Hill Cir Austin, TX 78758	Amount of Contribution (\$) \$210.84
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, Phyllis <hr/> Contributor address; City; State; Zip Code 606 W Croslin St Austin, TX 78752	Amount of Contribution (\$) \$40.00
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: 8/8 Rpt: 11/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 12/05/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiner, Shulamith <hr/> 6 Contributor address; City; State; Zip Code 8402 Appalachian Dr Austin, TX 78759	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Nuria <hr/> Contributor address; City; State; Zip Code 1908 Cliff St Austin, TX 78705	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self-employed

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 12/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 11/30/2021	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Guzmán, Monica	9 Loan Amount (\$) \$100.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 8400 Jamestown Dr Apt 426 Austin, TX 78758	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
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: 1/3 Rpt: 13/16	2 FILER NAME Guzman, Monica A.	3 Filer ID (Ethics Commission Filers) 00090757
4 Date 12/16/2021	5 Payee name City of Austin	
6 Amount (\$) \$500.00	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) 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 Filing Fee for January 2022 Special Election (ballot application)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/26/2021	Payee name DonateWay	
Amount (\$) \$145.16	Payee address; City; State; Zip Code PO Box 301267 Austin, TX 78703-1267	
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 Process fee for online contributions
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/12/2021	Payee name FedEx Office Print & Ship Center	
Amount (\$) \$1.30	Payee address; City; State; Zip Code 9222 Burnet Rd Ste 101 Austin, TX 78758	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/3 Rpt: 14/16	2 FILER NAME Guzman, Monica A.	3 Filer ID (Ethics Commission Filers) 00090757
4 Date 12/13/2021	5 Payee name FedEx Office Print & Ship Center	
6 Amount (\$) \$28.95	7 Payee address; City; State; Zip Code 9222 Burnet Rd Ste 101 Austin, TX 78758	
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 print order
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/21/2021	Payee name HEB	
Amount (\$) \$18.64	Payee address; City; State; Zip Code 9414 N Lamar Blvd Austin, TX 78753	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dec 21 Meet & Greet - refreshments, plastic utensils, paper cups
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/21/2021	Payee name Mi Tradicion	
Amount (\$) \$24.45	Payee address; City; State; Zip Code 8716 Research Blvd Ste 290 Austin, TX 78758	
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 Dec 21 Meet & Greet - refreshments
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/3 Rpt: 15/16	2 FILER NAME Guzman, Monica A.	3 Filer ID (Ethics Commission Filers) 00090757
4 Date 12/14/2021	5 Payee name Texas Democratic Party	
6 Amount (\$) \$270.00	7 Payee address; City; State; Zip Code PO Box 15707 Austin, TX 78761	
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 VAN
9 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: 1/1 Rpt: 16/16	2 FILER NAME Guzman, Monica A.	3 Filer ID (Ethics Commission Filers) 00090757
4 Date 11/24/2021	5 Payee name USPS PO Boxes Online	
6 Amount (\$) \$51.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 8557 Research Blvd Ste 124 Austin, TX 78758	
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 Above address is for the Town North USPS station
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held