

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: 79	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Jennifer M		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/04/2022		
	NICKNAME LAST SUFFIX Virden				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 8307 High Oak DR Austin, TX 78759			Date Hand-delivered or Date Postmarked	
				Receipt # Amount	
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Robin				
	NICKNAME LAST SUFFIX Coopwood				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4408 Spicewood Springs RD Austin, TX 78759				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 415-6772				
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/01/2021 12/31/2021				
10 ELECTION	ELECTION DATE Month Day Year 11/08/2022		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) Mayor		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Virden, Jennifer M	14 Filer ID (Ethics Commission Filers) 00090501
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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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME <hr/> COMMITTEE ADDRESS <hr/> COMMITTEE CAMPAIGN TREASURER NAME <hr/> COMMITTEE CAMPAIGN TREASURER ADDRESS <hr/>

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)	\$ 46,670.88
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 20,638.46
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 326,847.69
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 300,000.00

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 Virden
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

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

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18 FILER NAME Virden, Jennifer M		19 Filer ID (Ethics Commission Filers) 00090501
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 46,670.88
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	\$ 300,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 20,638.46
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/54 Rpt: 4/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/08/2021	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 Austin, TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 11/09/2021	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 Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarado, H. <hr/> Contributor address; City; State; Zip Code 11001 Canterbury Tales LN Austin, TX 78748	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Berkshire Hathaway		Employer (See Instructions) Parts Manager
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarado, H. <hr/> Contributor address; City; State; Zip Code 11001 Canterbury Tales LN Austin, TX 78748	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Berkshire Hathaway		Employer (See Instructions) Parts Manager
Date 12/03/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvis, John R. <hr/> Contributor address; City; State; Zip Code 14800 Banbridge TRL Austin, TX 78717	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/54 Rpt: 5/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/08/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Angellini <hr/> 6 Contributor address; City; State; Zip Code 1730 Canonero DR Austin, TX 78746	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Requested		9 Employer (See Instructions) Requested
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anspaugh, Robert <hr/> Contributor address; City; State; Zip Code 3113 Lynridge DR Austin, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Army		Employer (See Instructions) TMD
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Tara <hr/> Contributor address; City; State; Zip Code 12 Margranita CRES Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) JLM
Date 12/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Jeffrey <hr/> Contributor address; City; State; Zip Code 5604 Spurflower DR Austin, TX 78759	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Barnett Properties
Date 12/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Marilyn <hr/> Contributor address; City; State; Zip Code 6401 Mesa DR Austin, TX 78731	Amount of Contribution (\$) \$250.00
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: 3/54 Rpt: 6/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/15/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Gregg A. <hr/> 6 Contributor address; City; State; Zip Code 12014 Lincolnshire DR Austin, TX 78758	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 12/04/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Larry M. <hr/> Contributor address; City; State; Zip Code 2624 Tom Miller ST Austin, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Larry M. <hr/> Contributor address; City; State; Zip Code 2624 Tom Miller ST Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/04/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Shirley <hr/> Contributor address; City; State; Zip Code 2624 Tom Miller ST Austin, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Shirley <hr/> Contributor address; City; State; Zip Code 2624 Tom Miller ST Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/54 Rpt: 7/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/11/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Michelle <hr/> 6 Contributor address; City; State; Zip Code 5100 Beverly Skyline Austin, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 11/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boardman, Gerre L. <hr/> Contributor address; City; State; Zip Code 3916 Wyldwood RD Austin, TX 78739	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boardman, Lyle C. <hr/> Contributor address; City; State; Zip Code 3916 Wyldwood RD Austin, TX 78739	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bohls, Laura <hr/> Contributor address; City; State; Zip Code 3801 Eastledge DR Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowen, Charles <hr/> Contributor address; City; State; Zip Code 3801 N. Capital of Texas HWY Ste. E-240-206 Austin, TX 78746	Amount of Contribution (\$) \$400.00
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: 5/54 Rpt: 8/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/16/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowen, Jo Dee 6 Contributor address; City; State; Zip Code 6605 West Courtyard DR Austin, TX 78730	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 11/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Darren Contributor address; City; State; Zip Code 4313 Dunning LN Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Small Business Owner		Employer (See Instructions) Self
Date 11/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, J. Tim Contributor address; City; State; Zip Code 2201 Exposition BLVD Apt. B Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Joel Contributor address; City; State; Zip Code 2727 Exposition BLVD Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bufkin, James Contributor address; City; State; Zip Code 2309 West 8th ST Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Bufkin Engineering

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/54 Rpt: 9/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/30/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkett, Donna 6 Contributor address; City; State; Zip Code 8173 Ceberry DR Austin, TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Pharmacist		9 Employer (See Instructions) Texas Oncology
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkett, Donna Contributor address; City; State; Zip Code 8173 Ceberry DR Austin, TX 78759	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Texas Oncology
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Joseph Howell Contributor address; City; State; Zip Code 2113 Zach Scott ST Austin, TX 78723	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) Senior Project Manager		Employer (See Instructions) Jones Lang LaSalle
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Joseph Howell Contributor address; City; State; Zip Code 2113 Zach Scott ST Austin, TX 78723	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) Senior Project Manager		Employer (See Instructions) Jones Lang LaSalle
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Guillermo Contributor address; City; State; Zip Code 11309 Pradera DR Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Construction Contractor		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/54 Rpt: 10/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/23/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Mary <hr/> 6 Contributor address; City; State; Zip Code 6716 Roseborough DR Austin, TX 78747	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Personal Trainer		9 Employer (See Instructions) YMCA
Date 12/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castiglione, Elizabeth <hr/> Contributor address; City; State; Zip Code 3307 Clearview DR Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Recruiting Coordinator		Employer (See Instructions) UT Austin
Date 12/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cermak, Margaret <hr/> Contributor address; City; State; Zip Code 6044 Angelo ST Round Rock, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cermak, Margaret <hr/> Contributor address; City; State; Zip Code 6044 Angelo ST Round Rock, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Collin <hr/> Contributor address; City; State; Zip Code 6515 Hiridge Hollow DR Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Architect		Employer (See Instructions) General Motors

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/54 Rpt: 11/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/15/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chastain, Stephen <hr/> 6 Contributor address; City; State; Zip Code 3501 Peregrine Falcon DR Austin, TX 78746	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 11/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaudhari, Rupal <hr/> Contributor address; City; State; Zip Code 14408 Geronimo ST Leander, TX 78641	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney/Accountant		Employer (See Instructions) Pecan Park Hospitality, LLC
Date 11/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chibib, Michael <hr/> Contributor address; City; State; Zip Code 7909 Ceberry DR Austin, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian, Kim <hr/> Contributor address; City; State; Zip Code 4205 Woodway DR Austin, TX 78731	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EA		Employer (See Instructions) UT
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chumley, Angela <hr/> Contributor address; City; State; Zip Code 0000 Greenslope DR Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Twilio

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/54 Rpt: 12/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/01/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Leilani D. 6 Contributor address; City; State; Zip Code 11713 Norwegian Wood DR Austin, TX 78758	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Yoga Instructor		9 Employer (See Instructions) Self
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, William Contributor address; City; State; Zip Code 28122 E. Benders Landing Spring, TX 77386	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffman, Gary Contributor address; City; State; Zip Code 1604 Fortview RD Austin, TX 78704	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Austin Aqua-Dome
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Lee Contributor address; City; State; Zip Code 2906 Tarry TRL Austin, TX 78703	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Emerson Group, LLC
Date 11/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Clayton Daniel Contributor address; City; State; Zip Code 4009 Sabio DR Unit 277 Austin, TX 78749	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Plant Manager		Employer (See Instructions) A. W. Cook Cement Products

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/54 Rpt: 13/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/17/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Daniel R. <hr/> 6 Contributor address; City; State; Zip Code 360 Nueces ST Unit 2908 Austin, TX 78701	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) A. W. Cook Cement Products
Date 11/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Kimberly Ann <hr/> Contributor address; City; State; Zip Code 360 Nueces ST Unit 2908 Austin, TX 78701	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) A. W. Cook Cement Products
Date 11/09/2021	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 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) NRF
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coopwood, Robin <hr/> Contributor address; City; State; Zip Code 4408 Spicewood Springs RD Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coopwood, Sara <hr/> Contributor address; City; State; Zip Code 4411 Grand Park DR Timnath, CO 80547	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Mary's Mountain Cookies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/54 Rpt: 14/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/08/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coopwood, Thomas B. (Dr.) <hr/> 6 Contributor address; City; State; Zip Code 4411 Grand Park DR Timnath, CO 80547	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Surgeon		9 Employer (See Instructions) UCHealth
Date 11/09/2021	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 Unit 1110 Austin, TX 78730	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) TQL
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Cliff <hr/> Contributor address; City; State; Zip Code 11304 Vallecito CV Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daugherty, Gordon <hr/> Contributor address; City; State; Zip Code 8807 Wildridge DR Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delvesco, Arthur <hr/> Contributor address; City; State; Zip Code 3674 Ranch Creek DR Austin, TX 78730	Amount of Contribution (\$) \$400.00
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: 12/54 Rpt: 15/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/16/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downey, Patty 6 Contributor address; City; State; Zip Code 3801 Far View DR Austin, TX 78730	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 12/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drozd, Robert Contributor address; City; State; Zip Code 12317 Cahone TRL Austin, TX 78729	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Axis Communications
Date 12/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dryden, Benita 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) Real Estate Broker		Employer (See Instructions) Self
Date 12/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dryden, Kenny 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) Commercial Real Estate Broker		Employer (See Instructions) Self-Employed
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eastberg, John Contributor address; City; State; Zip Code 5704 Painted Valley DR Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Computer Professional		Employer (See Instructions) GM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/54 Rpt: 16/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/08/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easter, Patrick 6 Contributor address; City; State; Zip Code 4501 Bilboa DR Austin, TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner/Real Estate Broker		9 Employer (See Instructions) Easter and Easter
Date 11/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrlich, Amy Grimes Contributor address; City; State; Zip Code 3500 Scenic Hill DR Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrlich, Robert M. Contributor address; City; State; Zip Code 3500 Scenic Hills DR Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Ed Contributor address; City; State; Zip Code P. O. Box 130 Round Top, TX 78954	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feiner, Robert Contributor address; City; State; Zip Code 6605 Dogwood Creek DR Austin, TX 78746	Amount of Contribution (\$) \$100.00
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: 14/54 Rpt: 17/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/08/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, John <hr/> 6 Contributor address; City; State; Zip Code 8210 Bent Tree RD Unit 222 Austin, TX 78759	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Austin Infiniti
Date 11/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Mark <hr/> Contributor address; City; State; Zip Code P. O. Box 1451 Manchaca, TX 78652	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 12/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzpatrick, Barbara A. <hr/> Contributor address; City; State; Zip Code 32211 Rosevear ST Beverly Hills, MI 48025-3922	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fly, Mary <hr/> Contributor address; City; State; Zip Code 6701 W. Courtyard DR Austin, TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Carl <hr/> Contributor address; City; State; Zip Code 4907 Rollingwood DR Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) AG

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/54 Rpt: 18/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/16/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklin, Mark 6 Contributor address; City; State; Zip Code 2413 Indian TRL Austin, TX 78703	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Business Investment		9 Employer (See Instructions) Self
Date 11/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Marilyn M. Contributor address; City; State; Zip Code 2703 Scenic DR Austin, TX 78703	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Robert W. Contributor address; City; State; Zip Code 2703 Scenic DR Austin, TX 78703	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilman, Edward Contributor address; City; State; Zip Code 2912 Cherry LN Austin, TX 78703	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) USAA
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Steven Contributor address; City; State; Zip Code 4609 Lyons RD Austin, TX 78702	Amount of Contribution (\$) \$50.00
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: 16/54 Rpt: 19/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/09/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Steven <hr/> 6 Contributor address; City; State; Zip Code 4609 Lyons RD Austin, TX 78702	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greening, John <hr/> Contributor address; City; State; Zip Code 6900 Ligustrum CV Austin, TX 78750	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hablinski, Leigh Davis <hr/> Contributor address; City; State; Zip Code 2905 Westlake CV Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hallum, Ashley <hr/> Contributor address; City; State; Zip Code 3028 Oak Vista LN Round Rock, TX 78681	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/16/2021	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 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Construction Management		Employer (See Instructions) Sabre Commercial

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/54 Rpt: 20/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/09/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatton, William 6 Contributor address; City; State; Zip Code 11808 Charing Cross RD Austin, TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Construction Management		9 Employer (See Instructions) Sabre Commercial
Date 11/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Head, Becky Contributor address; City; State; Zip Code 7502 Downridge DR Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Head, Ray Contributor address; City; State; Zip Code 7502 Downridge DR Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helgeson, Pat Contributor address; City; State; Zip Code 5512 Oakwood CV Apt. 152 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RE Developer		Employer (See Instructions) Sparrow Partners
Date 11/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helgren, Jim R. Contributor address; City; State; Zip Code 1210 Wilderness CV Austin, TX 78746	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/54 Rpt: 21/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/08/2021	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 Unit 210 Austin, TX 78759	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 11/15/2021	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 Austin, TX 78716	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Higgins Jr., Hugh K. <hr/> Contributor address; City; State; Zip Code 8115 East CT Austin, TX 78759	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) High, Lori <hr/> Contributor address; City; State; Zip Code 603 Sinclair DR Spicewood, TX 78669	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinkle, Ricky A. <hr/> Contributor address; City; State; Zip Code 8409 Ardash LN Austin, TX 78759	Amount of Contribution (\$) \$30.00
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: 19/54 Rpt: 22/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/14/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holeman, Jane R. <hr/> 6 Contributor address; City; State; Zip Code 5704 Sunset RDG Austin, TX 78735	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 12/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holeman, Mike W. <hr/> Contributor address; City; State; Zip Code 5704 Sunset RDG Austin, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holt, Sandra H. <hr/> Contributor address; City; State; Zip Code 5000 Mission Oaks BLVD Unit 17 Austin, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holt, W. Thad <hr/> Contributor address; City; State; Zip Code 5000 Mission Oaks BLVD Unit 17 Austin, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hornickel, Deborah <hr/> Contributor address; City; State; Zip Code 3206 Oakmont BLVD Austin, TX 78703	Amount of Contribution (\$) \$100.00
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: 20/54 Rpt: 23/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/30/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, John 6 Contributor address; City; State; Zip Code 3111 Westlake DR Austin, TX 78746	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Ruth Contributor address; City; State; Zip Code 4900 Interlachen LN Austin, TX 78747	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/01/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ireland, John D. Contributor address; City; State; Zip Code 301 West AVE Apt. 4405 Austin, TX 78701	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 12/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Betty Contributor address; City; State; Zip Code 8210 Bent Tree RD Unit 207 Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Bill Contributor address; City; State; Zip Code 15401 Storm DR Austin, TX 78734	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Cabinetmaker		Employer (See Instructions) Johnson Cabinets & Woodworking

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/54 Rpt: 24/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/18/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Catherine Matthews <hr/> 6 Contributor address; City; State; Zip Code 1503 Marshall LN Austin, TX 78703	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 12/02/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson Jr., William C. <hr/> Contributor address; City; State; Zip Code 10123 Dianella LN Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Mark <hr/> Contributor address; City; State; Zip Code 913 West 29th ST Austin, TX 78705	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Builder/Developer		Employer (See Instructions) Self
Date 11/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph Jr., Joe L. <hr/> Contributor address; City; State; Zip Code 13600 Caldwell DR Austin, TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaiwi, Susan W. <hr/> Contributor address; City; State; Zip Code 4103 Circletree Loop Austin, TX 78731	Amount of Contribution (\$) \$100.00
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: 22/54 Rpt: 25/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/30/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Steve 6 Contributor address; City; State; Zip Code 9226 Knoll Crest Loop Austin, TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Arganteal
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Steve Contributor address; City; State; Zip Code 9226 Knoll Crest Loop Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Arganteal
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kepler, Kristin Contributor address; City; State; Zip Code 7001 Fireoak DR Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mom		Employer (See Instructions) Self
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Key, Karl Contributor address; City; State; Zip Code 3201 Pecos ST Unit 8 Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirk, Betty J. Contributor address; City; State; Zip Code 7802 Heathercrest CIR Austin, TX 78731	Amount of Contribution (\$) \$50.00
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: 23/54 Rpt: 26/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/17/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kocurek, Nancy K. <hr/> 6 Contributor address; City; State; Zip Code 4010 Lewis LN Austin, TX 78756	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kohls, Robert <hr/> Contributor address; City; State; Zip Code 8818 Silverarrow CIR Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kohls, Robert <hr/> Contributor address; City; State; Zip Code 8818 Silverarrow CIR Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovacs, Robert <hr/> Contributor address; City; State; Zip Code 7009 Winterberry DR Austin, TX 78750	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/08/2021	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) Humana

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/54 Rpt: 27/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/15/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krause, Jane <hr/> 6 Contributor address; City; State; Zip Code 5704 Raindrop CV Austin, TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Retired
Date 11/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kres, Mark <hr/> Contributor address; City; State; Zip Code 11708 Prairie Hen LN Austin, TX 78758	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuglen, Craig <hr/> Contributor address; City; State; Zip Code 1310 Rockcliff RD Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaRoux, James <hr/> Contributor address; City; State; Zip Code 2302 West 10th ST Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leach, Cynthia <hr/> Contributor address; City; State; Zip Code 4200 Jackson AVE Unit 4009 Austin, TX 78731	Amount of Contribution (\$) \$50.00
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: 25/54 Rpt: 28/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/22/2021	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) Real Estate Investments		9 Employer (See Instructions) Self
Date 12/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lott, Wayne <hr/> Contributor address; City; State; Zip Code 3901 Petra Path Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Lott Brothers Construction Company
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lundquist, Dan <hr/> Contributor address; City; State; Zip Code 6705 Mesa DR Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Lonestar Truck Group/Temple
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDonald, Roderick <hr/> Contributor address; City; State; Zip Code 4404 Small DR Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maddox, Larmon <hr/> Contributor address; City; State; Zip Code 3906 Beacondale DR Austin, TX 78727	Amount of Contribution (\$) \$25.00
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: 26/54 Rpt: 29/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/16/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maddox, Rebecca G. <hr/> 6 Contributor address; City; State; Zip Code 3906 Beacondale DR Austin, TX 78727	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 11/08/2021	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 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Qualcomm
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marburger, Noah <hr/> Contributor address; City; State; Zip Code 5501-A HWY 290 W Austin, TX 78735	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) BancorpSouth Bank
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marquardt, David <hr/> Contributor address; City; State; Zip Code 202 Nueces ST #1707 Austin, TX 78701	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) The Steam Team
Date 12/20/2021	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 Austin, TX 78737	Amount of Contribution (\$) \$200.00
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: 27/54 Rpt: 30/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/17/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Ben <hr/> 6 Contributor address; City; State; Zip Code 1717 Toomey RD Apt. 116 Austin, TX 78704	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Simpson Thacher & Bartlett LLC
Date 12/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, C. L. "Matt" <hr/> Contributor address; City; State; Zip Code 2311 West 8th ST Suite 1500 Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Matt Matthews & Company, LLC
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAdams, Joel <hr/> Contributor address; City; State; Zip Code 9512 Bully Hill CV Austin, TX 78759	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) McAdams Group
Date 11/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBride, Joe <hr/> Contributor address; City; State; Zip Code 6202 Shoal Creek W DR Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGee, George Vance <hr/> Contributor address; City; State; Zip Code 2302 East Side DR Unit 11 Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Real Estate Broker Associate		Employer (See Instructions) Austin Silent Market

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/54 Rpt: 31/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/08/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillian, Becky <hr/> 6 Contributor address; City; State; Zip Code 6906 Dogwood Hollow Austin, TX 78750	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) 512 Boutique Events
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillian, Becky <hr/> Contributor address; City; State; Zip Code 6906 Dogwood Hollow Austin, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) 512 Boutique Events
Date 12/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNamara, Brian <hr/> Contributor address; City; State; Zip Code 3104 Toro Ring ST Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McPherson, Lee <hr/> Contributor address; City; State; Zip Code 4720 Rockcliff RD Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self
Date 12/06/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mebane, Cheryl A. <hr/> Contributor address; City; State; Zip Code 3123 Eanes CIR Austin, TX 78746	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/54 Rpt: 32/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/06/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mebane, William A. <hr/> 6 Contributor address; City; State; Zip Code 3123 Eanes CIR Austin, TX 78746	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 11/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Christine <hr/> Contributor address; City; State; Zip Code 3939 Bee Caves RD Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Doug <hr/> Contributor address; City; State; Zip Code 8300 Carranzo DR Austin, TX 78735	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Former CEO/Advisor		Employer (See Instructions) Splunk
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miley, Joshua <hr/> Contributor address; City; State; Zip Code 4804 Hale DR Austin, TX 78749	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Bank of America
Date 11/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mock, Margaret M. <hr/> Contributor address; City; State; Zip Code 6606 Beckett RD Austin, TX 78749	Amount of Contribution (\$) \$200.00
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: 30/54 Rpt: 33/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/18/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mock, Ralph <hr/> 6 Contributor address; City; State; Zip Code 6606 Beckett RD Austin, TX 78749	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 12/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Brett <hr/> Contributor address; City; State; Zip Code 15601 Bandon DR Austin, TX 78717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Customer Account Manager		Employer (See Instructions) Baseload Power
Date 11/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nalle, William <hr/> Contributor address; City; State; Zip Code 4615 Bunny Run Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nalle, William <hr/> Contributor address; City; State; Zip Code 4615 Bunny Run Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Needler, Andy <hr/> Contributor address; City; State; Zip Code 11509 Highview DR Austin, TX 78750	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Mortgage Banker		Employer (See Instructions) Canopy Mortgage

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/54 Rpt: 34/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/08/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neillie, Lynn <hr/> 6 Contributor address; City; State; Zip Code 10900 Research BLVD Ste. C160-9, C16 Austin, TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Justin <hr/> Contributor address; City; State; Zip Code 2810 Norfolk DR Austin, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niemann, Larry <hr/> Contributor address; City; State; Zip Code 3419 Monte Vista DR Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, John <hr/> Contributor address; City; State; Zip Code 3917 Myrick DR Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Novy, Brian <hr/> Contributor address; City; State; Zip Code 3913 Edgerock DR Austin, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Commercial Real Estate Broker		Employer (See Instructions) The Brian Novy Company

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/54 Rpt: 35/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/10/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogden, Susan <hr/> 6 Contributor address; City; State; Zip Code 2302 West 10th ST Austin, TX 78703	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olle, Jeffrey <hr/> Contributor address; City; State; Zip Code 11925 Terraza CIR Austin, TX 78726	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrillo, Louis <hr/> Contributor address; City; State; Zip Code 5304 Park Hollow LN Austin, TX 78746	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Technology Consultant		Employer (See Instructions) Self
Date 11/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Bradley <hr/> Contributor address; City; State; Zip Code 3706 Greystone DR Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Bradley <hr/> Contributor address; City; State; Zip Code 3706 Greystone DR Austin, TX 78731	Amount of Contribution (\$) \$100.00
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: 33/54 Rpt: 36/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/08/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Bradley <hr/> 6 Contributor address; City; State; Zip Code 3706 Greystone DR Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Bradley <hr/> Contributor address; City; State; Zip Code 3706 Greystone DR Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Carolyn <hr/> Contributor address; City; State; Zip Code 3706 Greystone DR Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Donald (Dr.) <hr/> Contributor address; City; State; Zip Code 3706 Greystone DR Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Retired
Date 11/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patten, Buddy M. <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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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/54 Rpt: 37/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/09/2021	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 Austin, TX 78756	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Enviroplan Architects
Date 12/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pempsell, Paul Contributor address; City; State; Zip Code 8227 Summer Side DR Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pendergrass, Desiree Contributor address; City; State; Zip Code 5334 Hialeah DR Jackson, MS 39211	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Requested
Date 11/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pendergrass, Peter W. Contributor address; City; State; Zip Code 5334 Hialeah DR Jackson, MS 39211	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Requested
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peo, Marc Contributor address; City; State; Zip Code 6 Olde York RD Randolph, NJ 07869	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Heller

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/54 Rpt: 38/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/30/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, LaTrelle <hr/> 6 Contributor address; City; State; Zip Code 6203 Cat Mountain CV Austin, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pfeiffer, Peter <hr/> Contributor address; City; State; Zip Code 1800 West 6th ST Austin, TX 78703	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Barley I Pfeiffer Architecture
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pharr, Tami <hr/> Contributor address; City; State; Zip Code 124 Covington CV Georgetown, TX 78628	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Data Insights
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philipson, Gregg & Michelle <hr/> Contributor address; City; State; Zip Code 7802 Ginkgo CV Austin, TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Philipson Foundation		Employer (See Instructions) Retired
Date 12/01/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Clifford <hr/> Contributor address; City; State; Zip Code 13806 Lake View DR Austin, TX 78732	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Physician/Owner		Employer (See Instructions) Texas Direct Medical Care

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/54 Rpt: 39/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/15/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prevratil, Joseph <hr/> 6 Contributor address; City; State; Zip Code 11902 Buckingham RD Austin, TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Security Analyst		9 Employer (See Instructions) State of Texas
Date 12/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Puente, Juan <hr/> Contributor address; City; State; Zip Code 9901 Parkfield DR Austin, TX 78758	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Construction Contractor		Employer (See Instructions) Self
Date 12/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quaid, Buddy <hr/> Contributor address; City; State; Zip Code 2317 Bowman AVE Austin, TX 78703	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 11/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quaid, Buddy <hr/> Contributor address; City; State; Zip Code 2317 Bowman AVE Austin, TX 78703	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Joel <hr/> Contributor address; City; State; Zip Code 6706 Winnipeg CV Austin, TX 78759	Amount of Contribution (\$) \$150.00
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: 37/54 Rpt: 40/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/16/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Joel 6 Contributor address; City; State; Zip Code 6706 Winnipeg CV Austin, TX 78759	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Louis Contributor address; City; State; Zip Code 1602 West 39 1/2 ST Austin, TX 78756	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Advisor		Employer (See Instructions) Self
Date 12/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberson, Jay A. Contributor address; City; State; Zip Code 9001 Comburg DR Austin, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts Jr., Bob W. Contributor address; City; State; Zip Code P. O. Box 27023 Austin, TX 78755	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/28/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Bart Contributor address; City; State; Zip Code 10417 Brimfield DR Austin, TX 78726	Amount of Contribution (\$) \$25.00
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: 38/54 Rpt: 41/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/28/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Carla 6 Contributor address; City; State; Zip Code 10417 Brimfield DR Austin, TX 78726	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, James Contributor address; City; State; Zip Code 7800 Deer Ridge CIR Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, James Contributor address; City; State; Zip Code 7800 Deer Ridge CIR Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Leigh Ann Contributor address; City; State; Zip Code 4739 Cat Mountain DR Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronn, Ehud I. Contributor address; City; State; Zip Code 6508 Ladera Norte Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor of Finance		Employer (See Instructions) University of Texas at Austin

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/54 Rpt: 42/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/27/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Justin Dylan <hr/> 6 Contributor address; City; State; Zip Code 1600 S. 5th ST Austin, TX 78704	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Requested		9 Employer (See Instructions) Requested
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruggle, David <hr/> Contributor address; City; State; Zip Code 10300 Jollyville RD Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutledge, T. A. <hr/> Contributor address; City; State; Zip Code 10703 Windridge DR Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryder, Peggy <hr/> Contributor address; City; State; Zip Code 2805 Robbs Run Austin, TX 78703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryder, Peggy <hr/> Contributor address; City; State; Zip Code 2805 Robbs Run Austin, TX 78703	Amount of Contribution (\$) \$10.00
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: 40/54 Rpt: 43/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/13/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanderson, Graham <hr/> 6 Contributor address; City; State; Zip Code 3704 Weatherhill CV Austin, TX 78730	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Software		9 Employer (See Instructions) Vast
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sansone, Philip <hr/> Contributor address; City; State; Zip Code 40 North IH 35 Apt. 7-d-4 Austin, TX 78701	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) International Development		Employer (See Instructions) Whole Foods Market
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayers, Clint <hr/> Contributor address; City; State; Zip Code 3305 Stratford Hills LN Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Commercial Real Estate		Employer (See Instructions) Sayers Real Estate Advisors, Inc.
Date 11/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaffner, Tim <hr/> Contributor address; City; State; Zip Code 2602 Top CV Austin, TX 78704	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, James <hr/> Contributor address; City; State; Zip Code 600 Congress AVE Suite 500 Austin, TX 78701	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Horizon Bank

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/54 Rpt: 44/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/04/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuyler, Jerry R. <hr/> 6 Contributor address; City; State; Zip Code 7220 Comanche TR Austin, TX 78732	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 12/04/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuyler, Julie A. <hr/> Contributor address; City; State; Zip Code 7220 Comanche TR Austin, TX 78732	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott III, Wallace <hr/> Contributor address; City; State; Zip Code 2901 Oakhurst AVE Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate Development		Employer (See Instructions) Sutton Company
Date 12/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scotty, Michael <hr/> Contributor address; City; State; Zip Code 9002 Wildridge DR Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Self
Date 11/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sellars, Susan K. <hr/> Contributor address; City; State; Zip Code 6906 Priscilla DR Austin, TX 78752	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/54 Rpt: 45/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/11/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shah, Sandeep (Dr.) <hr/> 6 Contributor address; City; State; Zip Code 7804 Texas Plume RD Austin, TX 78759	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Radiologist		9 Employer (See Instructions) Austin Radiological Association
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharplin, Sylvia <hr/> Contributor address; City; State; Zip Code 1105 West 10th ST Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 12/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Jayson <hr/> Contributor address; City; State; Zip Code 2814 West 50th ST Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Terrain Holdings LP
Date 12/01/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shive Jr., James O. <hr/> Contributor address; City; State; Zip Code 6505 Auburndale ST Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shook, Stephen J. <hr/> Contributor address; City; State; Zip Code 4204 Tallowood DR Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) CPA		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: 43/54 Rpt: 46/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/09/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shumaker, John <hr/> 6 Contributor address; City; State; Zip Code 1814 Canonero DR Austin, TX 78746	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Connor Lee & Shumaker PLLC
Date 11/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Chad <hr/> Contributor address; City; State; Zip Code 1910 Collier ST Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Rita <hr/> Contributor address; City; State; Zip Code 11502 Heathrow DR Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HR Director		Employer (See Instructions) CG
Date 11/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Stephanie <hr/> Contributor address; City; State; Zip Code 1910 Collier ST Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinclair, Vallarie <hr/> Contributor address; City; State; Zip Code 7901 Ceberry DR Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Legal Ops		Employer (See Instructions) Dell

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/54 Rpt: 47/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/16/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skaggs, Betty <hr/> 6 Contributor address; City; State; Zip Code 4700 Toreador DR Austin, TX 78746	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 11/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skaggs, James <hr/> Contributor address; City; State; Zip Code 4700 Toreador DR Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Allen <hr/> Contributor address; City; State; Zip Code P. O. Box 6026 Austin, TX 78762	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jare H. <hr/> Contributor address; City; State; Zip Code 4200 Jackson AVE Apt. 4015 Austin, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Jonathon D. <hr/> Contributor address; City; State; Zip Code 4712 Paraiso PKWY Austin, TX 78738	Amount of Contribution (\$) \$400.00
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: 45/54 Rpt: 48/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/17/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Kendra H. <hr/> 6 Contributor address; City; State; Zip Code 4712 Paraiso PKWY Austin, TX 78738	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) N/A
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, William <hr/> Contributor address; City; State; Zip Code P. O. Box 5588 Austin, TX 78763	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Clinic Director		Employer (See Instructions) Airport Chiropractic & Rehabilitation
Date 11/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strickland, Carol <hr/> Contributor address; City; State; Zip Code 8610 Winding Walk Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Kuper Sothebys Realty
Date 12/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strubel, John M. <hr/> Contributor address; City; State; Zip Code 10801 Plumewood DR Austin, TX 78750	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Stephen <hr/> Contributor address; City; State; Zip Code 1901 N. Howe ST Unit 202 Chicago, IL 60614	Amount of Contribution (\$) \$400.00
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: 46/54 Rpt: 49/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/27/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swail, Brad <hr/> 6 Contributor address; City; State; Zip Code 1511 Wilson Heights DR Austin, TX 78746	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Podcaster		9 Employer (See Instructions) Self
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swisher, Richard <hr/> Contributor address; City; State; Zip Code 3601 Robbins RD Austin, TX 78730	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talley, Brian <hr/> Contributor address; City; State; Zip Code 3805 Meandering Creek CV Austin, TX 78746	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollen, Victoria <hr/> Contributor address; City; State; Zip Code 3801 Meandering Creek CV Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomko, Matthew <hr/> Contributor address; City; State; Zip Code 4501 Cross Valley Run Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Concerto Card Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/54 Rpt: 50/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/03/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trujillo, Sandy <hr/> 6 Contributor address; City; State; Zip Code 3809 Spicewood Springs RD #137 Austin, TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 12/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vallandingham, Mike <hr/> Contributor address; City; State; Zip Code 202 Nueces ST Unit 1701 Austin, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Wexum
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Landuyt, Dean <hr/> Contributor address; City; State; Zip Code 502 Sunny LN Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/09/2021	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 Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Reet, Brian <hr/> Contributor address; City; State; Zip Code 1002 Payne AVE Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/54 Rpt: 51/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/08/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Sicklen, Pamela <hr/> 6 Contributor address; City; State; Zip Code 10722 River Plantation DR Austin, TX 78747	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) Safeway Certifications, LLC
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Sicklen, Pamela <hr/> Contributor address; City; State; Zip Code 10722 River Plantation DR Austin, TX 78747	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Safeway Certifications, LLC
Date 11/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vance, Sherry L. <hr/> Contributor address; City; State; Zip Code 5114 Balcones Woods DR Suite 307, #276 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanderPloeg, Juliet <hr/> Contributor address; City; State; Zip Code 4301 Lostridge DR Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vargas, Carmen <hr/> Contributor address; City; State; Zip Code 9410 Bluegrass DR Austin, TX 78759	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Infineon

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/54 Rpt: 52/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/02/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virden, Norma Jean <hr/> 6 Contributor address; City; State; Zip Code 8046 Crestview DR Des Moines, IA 50320	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Child Support Recovery Officer		9 Employer (See Instructions) State of Iowa
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virun, William <hr/> Contributor address; City; State; Zip Code 10744 Bramblecrest DR Austin, TX 78726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Elizabeth D. <hr/> Contributor address; City; State; Zip Code 3405 Mountain Top CIR Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Jay R. <hr/> Contributor address; City; State; Zip Code 3405 Mountain Top CIR Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Regan <hr/> Contributor address; City; State; Zip Code 5625 Spurflower DR Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/54 Rpt: 53/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/14/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Wayne <hr/> 6 Contributor address; City; State; Zip Code 5625 Spurflower DR Austin, TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 11/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Arnold B. <hr/> Contributor address; City; State; Zip Code P. O. Box 1669 Austin, TX 78611	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) President & Owner		Employer (See Instructions) Senox Corp.
Date 11/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Elizabeth <hr/> Contributor address; City; State; Zip Code P. O. Box 1669 Burnet, TX 78611	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Wife		Employer (See Instructions) Husband
Date 11/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Serene <hr/> Contributor address; City; State; Zip Code 210 Lavaca ST Unit 3405 Austin, TX 78701	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 12/06/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webster, Darrell <hr/> Contributor address; City; State; Zip Code 1412 Vista Ridge CV Austin, TX 78754	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/54 Rpt: 54/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/30/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiner, Naomi <hr/> 6 Contributor address; City; State; Zip Code 70 Rainey ST #2006 Austin, TX 78701	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 11/08/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Yvonne <hr/> Contributor address; City; State; Zip Code 4508 South 1st ST Austin, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westmoreland, Kerri <hr/> Contributor address; City; State; Zip Code 8819 Silverarrow CIR Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) NA
Date 12/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Kay <hr/> Contributor address; City; State; Zip Code 3909 Rockledge DR Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Leon A. <hr/> Contributor address; City; State; Zip Code 3909 Rockledge DR Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/54 Rpt: 55/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/09/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, John <hr/> 6 Contributor address; City; State; Zip Code 902 Gardner RD Austin, TX 78721	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 12/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Meg <hr/> Contributor address; City; State; Zip Code 2005 Arthur LN Austin, TX 78704	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Meg <hr/> Contributor address; City; State; Zip Code 2005 Arthur LN Austin, TX 78704	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Sally <hr/> Contributor address; City; State; Zip Code 1617 Watchhill RD Austin, TX 78703	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winstead, Pete <hr/> Contributor address; City; State; Zip Code 79 Pascal LN Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Winstead PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/54 Rpt: 56/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/15/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winstead, Tomi <hr/> 6 Contributor address; City; State; Zip Code 79 Pascal LN Austin, TX 78746	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolbrueck, Matthew <hr/> Contributor address; City; State; Zip Code 703 County Road 368 Taylor, TX 76574	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Truck Driver		Employer (See Instructions) Self
Date 11/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolbrueck, Matthew <hr/> Contributor address; City; State; Zip Code 703 County Road 368 Taylor, TX 76574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Truck Driver		Employer (See Instructions) Self
Date 12/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolbrueck, Matthew <hr/> Contributor address; City; State; Zip Code 703 County Road 368 Taylor, TX 76574	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Truck Driver		Employer (See Instructions) Self
Date 12/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yenzer, Drew <hr/> Contributor address; City; State; Zip Code 7516 Colina Vista Loop Austin, TX 78750	Amount of Contribution (\$) \$25.00
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: 54/54 Rpt: 57/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/18/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Rebecca <hr/> 6 Contributor address; City; State; Zip Code 5603 Lakemoore DR Austin, TX 78731	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 11/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zarbock, Kent <hr/> Contributor address; City; State; Zip Code 7105 West Rim DR Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Austin Real Estate Experts
Date 12/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zent, Christopher <hr/> Contributor address; City; State; Zip Code 7920 Rockwood LN Unit 102 Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 58/79
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 12/20/2021	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Virden, Jennifer	9 Loan Amount (\$) \$300,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 8307 High Oak Drive Austin, TX 78759	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions) Real Estate Broker / Builder		13 Employer (See Instructions) Self-Employed/AustinHaus Realty & Restorations, LLC
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: 1/21 Rpt: 59/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/21/2021	5 Payee name Amazon	
6 Amount (\$) \$17.31	7 Payee address; City; State; Zip Code 440 Terry AVE N Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Stationery	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Envelopes.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/10/2021	Payee name Amazon	
Amount (\$) \$147.10	Payee address; City; State; Zip Code 440 Terry AVE N Seattle, WA 98109	
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 Toner.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2021	Payee name Amazon	
Amount (\$) \$55.77	Payee address; City; State; Zip Code 440 Terry AVE N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Labels.
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: 2/21 Rpt: 60/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/10/2021	5 Payee name Amazon	
6 Amount (\$) \$37.18	7 Payee address; City; State; Zip Code 440 Terry AVE N Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Labels.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/11/2021	Payee name Amazon	
Amount (\$) \$152.52	Payee address; City; State; Zip Code 440 Terry AVE N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Envelopes.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2021	Payee name Anedot, Inc.	
Amount (\$) \$1,388.74	Payee address; City; State; Zip Code 1340 Poydras ST Suite 1770 New Orleans, LA 70112	
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 Transaction fees.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/21 Rpt: 61/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/14/2021	5 Payee name Austin Centre Parking	
6 Amount (\$) \$27.00	7 Payee address; City; State; Zip Code 701 Brazos 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 Parking garage - for campaign meeting.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2021	Payee name Constant Contact	
Amount (\$) \$69.29	Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Email.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/17/2021	Payee name Constant Contact	
Amount (\$) \$47.97	Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Email.
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: 4/21 Rpt: 62/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/17/2021	5 Payee name Constant Contact	
6 Amount (\$) \$47.97	7 Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Email.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/17/2021	Candidate/Officeholder name Office sought Office held	
Payee name Constant Contact		
Amount (\$) \$47.97	Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Email.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/22/2021	Candidate/Officeholder name Office sought Office held	
Payee name Constant Contact		
Amount (\$) \$47.97	Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Email.
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: 5/21 Rpt: 63/79	2 FILER NAME Virden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/17/2021	5 Payee name Constant Contact	
6 Amount (\$) \$47.97	7 Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Email.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/19/2021	Payee name Etsy	
Amount (\$) \$28.10	Payee address; City; State; Zip Code 55 Washington ST Suite 512 Brooklyn, NY 11201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Stationery	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense "Thank You" cards.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/30/2021	Payee name GoDaddy	
Amount (\$) \$355.65	Payee address; City; State; Zip Code 14455 N. Hayden RD Suite 219 Scottsdale, AZ 85260	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Internet/Email	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet/Email.
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: 6/21 Rpt: 64/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/30/2021	5 Payee name GoDaddy	
6 Amount (\$) \$83.19	7 Payee address; City; State; Zip Code 14455 N. Hayden RD Suite 219 Scottsdale, AZ 85260	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Internet/Email	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet/Email.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/13/2021	Payee name Lohmeier, Kerri	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 2307 Lake Austin BLVD Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Photography	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photographs.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2021	Payee name Moonshot Marketers, LLC	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1217 Tudor House RD Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website.
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: 7/21 Rpt: 65/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/12/2021	5 Payee name Office Depot	
6 Amount (\$) \$450.30	7 Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Toner and paper.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/12/2021	Payee name Office Depot	
Amount (\$) \$38.96	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Stationery.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/18/2021	Payee name Office Depot	
Amount (\$) \$958.90	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Postage and stationery.
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: 8/21 Rpt: 66/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/23/2021	5 Payee name Office Depot	
6 Amount (\$) \$19.04	7 Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Self-inking stamp.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/12/2021	Payee name Office Depot	
Amount (\$) \$55.00	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Stationery, etc.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2021	Payee name Office Depot	
Amount (\$) \$757.58	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Postage, stationery, etc.
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: 9/21 Rpt: 67/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/09/2021	5 Payee name Office Depot	
6 Amount (\$) \$116.62	7 Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Stationery and envelopes.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/23/2021	Payee name Office Depot	
Amount (\$) \$115.85	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Envelopes.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/10/2021	Payee name Office Depot	
Amount (\$) \$110.40	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toner.
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: 10/21 Rpt: 68/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/19/2021	5 Payee name Office Depot	
6 Amount (\$) \$146.11	7 Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Stationery.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/12/2021	Payee name Office Depot	
Amount (\$) \$1,160.00	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Postage.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2021	Payee name Office Depot	
Amount (\$) \$233.80	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toner.
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: 11/21 Rpt: 69/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/22/2021	5 Payee name Office Depot	
6 Amount (\$) \$580.00	7 Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Postage.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2021	Payee name Parsons, Bradley	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 3706 Greystone DR Austin, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign assistant.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/22/2021	Payee name Parsons, Bradley	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 3706 Greystone DR Austin, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign assistant.
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: 12/21 Rpt: 70/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/03/2021	5 Payee name Parsons, Bradley	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 3706 Greystone DR Austin, TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign assistant.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/17/2021	Payee name Parsons, Bradley	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 3706 Greystone DR Austin, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign assistant.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/01/2021	Payee name Patreon	
Amount (\$) \$5.00	Payee address; City; State; Zip Code 395 Page Mill RD Palo Alto, CA 94306	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brad Swail's "The Austin City Councilman" podcast.
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: 13/21 Rpt: 71/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/01/2021	5 Payee name Patreon	
6 Amount (\$) \$5.00	7 Payee address; City; State; Zip Code 395 Page Mill RD Palo Alto, CA 94306	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brad Swail's "The Austin City Councilman" podcast.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2021	Payee name Patreon	
Amount (\$) \$5.00	Payee address; City; State; Zip Code 395 Page Mill RD Palo Alto, CA 94306	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brad Swail's "The Austin City Councilman" podcast.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2021	Payee name Patreon	
Amount (\$) \$5.00	Payee address; City; State; Zip Code 395 Page Mill RD Palo Alto, CA 94306	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brad Swail's "The Austin City Councilman" podcast.
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: 14/21 Rpt: 72/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/01/2021	5 Payee name Patreon	
6 Amount (\$) \$5.41	7 Payee address; City; State; Zip Code 395 Page Mill RD Palo Alto, CA 94306	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brad Swail's "The Austin City Councilman" podcast.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2021	Payee name Patreon	
Amount (\$) \$5.41	Payee address; City; State; Zip Code 395 Page Mill RD Palo Alto, CA 94306	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brad Swail's "The Austin City Councilman" podcast.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/22/2021	Payee name Pinpoint Action, LLC	
Amount (\$) \$7,000.00	Payee address; City; State; Zip Code 1205 BMC Drive Suite 205 Cedar Park, TX 78613	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign support.
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: 15/21 Rpt: 73/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/21/2021	5 Payee name Randalls	
6 Amount (\$) \$221.59	7 Payee address; City; State; Zip Code 8040 Mesa DR Austin, TX 78731	
8 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 For volunteers.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/21/2021	Candidate/Officeholder name	Office sought
Amount (\$) \$146.03	Payee name Randalls	
	Payee address; City; State; Zip Code 8040 Mesa DR Austin, TX 78731	
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 For volunteers.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/20/2021	Candidate/Officeholder name	Office sought
Amount (\$) \$42.90	Payee name Rudy's BBQ	
	Payee address; City; State; Zip Code 11570 Research 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 Campaign meeting.
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: 16/21 Rpt: 74/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/09/2021	5 Payee name Sam's Club	
6 Amount (\$) \$25.20	7 Payee address; City; State; Zip Code 9700 N. Capital of TX HWY Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Envelopes.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/11/2021	Payee name Sam's Club	
Amount (\$) \$76.51	Payee address; City; State; Zip Code 9700 N. Capital of TX HWY Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Envelopes.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2021	Payee name Staples	
Amount (\$) \$159.12	Payee address; City; State; Zip Code 1201 Barbara Jordan BLVD Suite 700 Austin, TX 78723	
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 Toner.
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: 17/21 Rpt: 75/79	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/26/2021	5 Payee name The UPS Store	
6 Amount (\$) \$180.00	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 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 USPS box rental.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/17/2021	Payee name Waterloo Media	
Amount (\$) \$1,975.00	Payee address; City; State; Zip Code 8308 N. IH 35 Austin, TX 78753	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Radio ads.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/20/2021	Payee name Wix	
Amount (\$) \$7.03	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website.
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: 18/21 Rpt: 76/79	2 FILER NAME Virden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 12/17/2021	5 Payee name Wix	
6 Amount (\$) \$30.31	7 Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/17/2021	Payee name Wix	
Amount (\$) \$30.31	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/20/2021	Payee name Wix	
Amount (\$) \$7.03	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website.
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: 19/21 Rpt: 77/79	2 FILER NAME Virden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 08/17/2021	5 Payee name Wix	
6 Amount (\$) \$30.31	7 Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/20/2021	Payee name Wix	
Amount (\$) \$7.03	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2021	Payee name Wix	
Amount (\$) \$30.31	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website.
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: 20/21 Rpt: 78/79	2 FILER NAME Virden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 09/20/2021	5 Payee name Wix	
6 Amount (\$) \$7.03	7 Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/17/2021	Payee name Wix	
Amount (\$) \$30.31	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/20/2021	Payee name Wix	
Amount (\$) \$7.03	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website.
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: 21/21 Rpt: 79/79	2 FILER NAME Virden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 11/17/2021	5 Payee name Wix	
6 Amount (\$) \$30.31	7 Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2021	Payee name Wix	
Amount (\$) \$7.03	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/04/2021	Payee name la Madeleine	
Amount (\$) \$12.99	Payee address; City; State; Zip Code 9828 Great Hills TRL 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 Campaign meeting.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held