FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00090519 3 COMMITTEE NAME **OFFICE USE ONLY** Had Enough Austin? Date Received **ELECTRONICALLY FILED** 01/14/2022 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 6836 Austin Center Blvd., #280 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78731 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ellen NAME NICKNAME LAST **SUFFIX** Wood STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 6836 Austin Center Blvd., #280 STREET **ADDRESS** (Residence or Business) Austin, TX 78731 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** MAILING **ADDRESS** TX Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 450-6550 PHONE REPORT X January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Year Month Day Month Day COVERED **THROUGH** 12/31/2021 07/01/2021 11 ELECTION **ELECTION DATE ELECTION TYPE** χ Other Month Day Year Primary Runoff 12/31/2021 General Special No election related activities for this semi-annual reporting period

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Had Enough Austin?			00090519	
14 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME		
(Attach lists on plain paper to complete this report if necessary.)	Candidate	OFFICE SOLICHT (condidate) / OFFICE HEL	D (afficeholder)	
	Officeholder	OFFICE SOUGHT (candidate) / OFFICE HEL	D (officeriolder)	
SUPPORT	BALLOT IDENTIFICATION / #			ON DATE
(Candidate or Measure) OPPOSE (Candidate or Measure)		BALLOT IDENTIFICATION / #	Month	Day Year
ASSIST (Officeholder)	Measure Measure	DESCRIPTION		
15 CONTRIBUTION TOTALS		TRIBUTIONS OF \$50 OR LESS (OTHER THA ES OF LOANS), UNLESS ITEMIZED	N PLEDGES,	\$ \$0.00
	2. TOTAL POLITICAL CO	ONTRIBUTIONS		* ***********************************
	(OTHER THAN PLEDGES	S, LOANS, OR GUARANTEES OF LOANS)		\$ \$469.39
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPE	NDITURES OF \$100 OR LESS, UNLESS ITE	MIZED	\$ \$0.00
	4. TOTAL POLITICAL EX	(PENDITURES		\$ \$429.14
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ \$176.35	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMO DAY OF THE REPORTIN	UNT OF ALL OUTSTANDING LOANS AS OF G PERIOD	THE LAST	\$ \$0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of per and correct and includes all informatio Title 15, Election Code.		
		Eller	n Wood	
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Ca	mpaign Treasure	er
		, 1	his the	day
of	, 20, to certify which	, witness my hand and seal of office.		
Signature of officer add	ministering oath Print	ed name of officer administering oath	Title of office	er administering oath

SUBTOTALS - SPAC

FORM SPAC COVER SHEET PG 3

3 of 9				
17 COMMITT Had Enou	EE NAME igh Austin?	18 Filer ID 00090519	(Ethics Commission Filers)	
l	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT	
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 469.39	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION)R	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
7.	SCHEDULE E: LOANS		\$	
8. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 120.00	
9. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 309.14	
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
11.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
12.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
14.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.			1 Total pages Sch: 1/1 Rpt:	
	2 FILER NAME Had Enough Austin?			es Commission Filers)
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS			\$	
5 Date 12/31/2021 6 Full name of contributor out-of-state PAC (ID#:) VCFO 7 Contributor address; City; State; Zip Code 6836 Austin Center Blvd Building 1 Ste 280 Austin, TX 78731			contribution (\$) \$150.00	9 In-kind contribution description Administrative and bookkeeping support I
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See ii	nstructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL)	(See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 09/29/2021	Full name of contributor out-of-state PAC (ID#:			Website Hosting and Marketing Services
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions)			·	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 09/28/2021	Full name of contributor out-of-state PAC (ID#:) VCFO Contributor address; City; State; Zip Code 6836 Austin Center Blvd Building 1 Ste 280 Austin, TX 78731			In-kind contribution description URL Registration Fees for Had Enough Austin
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON		nstructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

1 Total pages Schedule F1: Sch: 1/2 Rpt: 5/92 FILER NAME Had Enough Austin?3 Filer ID 000905194 Date5 Payee name	hics Commission Filers)
·	
4 Date 5 Payee name	
07/30/2021 American Bank	
6 Amount (\$) 7 Payee address; City; State; Zip Code	
\$20.00 3520 Bee Cave Rd #100	
Austin, TX 78746	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas Complete S	
EXPENDITURE Accounting/Banking Check if travel outside of Texas. Complete S Check if Austin, TX, officeholder living exper	
Bank service charge	51130
9 Complete ONLY if direct candidate/Officeholder name office sought office held expenditure to benefit C/OH	
Date Payee name	
08/31/2021 American Bank	
Amount (\$) Payee address; City; State; Zip Code	
\$20.00 3520 Bee Cave Rd #100	
\$25.00 0020 BGC CAVE NA #100	
Austin, TX 78746	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Accounting/Banking Check if travel outside of Texas. Complete S	
Check if Austin, TX, officeholder living exper	ense
Dank service charge	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
Date Payee name	
09/30/2021 American Bank	
Amount (\$) Payee address; City; State; Zip Code	
\$20.00 3520 Bee Cave Rd #100	
Austin, TX 78746	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas Complete S	
EXPENDITURE Accounting/Banking Check if travel outside of Texas. Complete S Check if Austin, TX, officeholder living exper	
Bank service charge	ense
Bank Service thange	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Ever
Accounting/Banking Fees
Consulting Expense Foot
Contributions/ Donations Made By - Gift/,
Candidate/Officeholder/Political Committee Legs

Event Expense
Fees
Food/Beverage Expense
Gitt/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to cor	-	ete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·		
	Sch: 2/2 Rpt: 6/9	Had Enough Austin?	00090519	
4	Date	5 Payee name		<u> </u>
	10/29/2021	American Bank		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$20.00	3520 Bee Cave Rd #100		
		Austin, TX 78746		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Accounting/Banking	` ,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Bank service charge
_				
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office souç H	ght	Office held
	Date	Payee name		
	11/30/2021	American Bank		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$20.00	3520 Bee Cave Rd #100		
		Austin, TX 78746		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
	ZA ZADITORZ			Check if Austin, TX, officeholder living expense
				Bank service charge
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI		yııı	Office field
	Data			
	Date	Payee name		
	12/31/2021	American Bank		
	Amount (\$)	Payee address; City; State; Zip Cor	de	
	\$20.00	3520 Bee Cave Rd #100		
		Austin, TX 78746		
	PURPOSE OF		(b)	Description
	EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Bank service charge
				
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI	•	J	

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/3 Rpt: 7/9 Had Enough Austin? 00090519 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 07/06/2021 Tesmer, Darrell Amount (\$) Payee address; City; State; Zip Code \$42.64 6836 Austin Center Blvd Building 1 Suite 280 Austin, TX 78731 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Accounting/Banking Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Quickbooks subscription fees 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/06/2021 Tesmer, Darrell Payee address: Amount (\$) City; State; Zip Code \$53.30 6836 Austin Center Blvd Building 1 Suite 280 Austin, TX 78731 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Quickbooks subscription fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/3 Rpt: 8/9 Had Enough Austin? 00090519 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS Date 5 Payee name 09/06/2021 Tesmer, Darrell Amount (\$) Payee address; City; State; Zip Code \$53.30 6836 Austin Center Blvd Building 1 Suite 280 Austin, TX 78731 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Accounting/Banking Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Quickbooks subscription fees 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/06/2021 Tesmer, Darrell Payee address: Amount (\$) City; State; Zip Code \$53.30 6836 Austin Center Blvd Building 1 Suite 280 Austin, TX 78731 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Quickbooks subscription fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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