

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) 00090823		2 Total pages filed: 20	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Thomas E.		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/09/2022		
	NICKNAME LAST SUFFIX Wald				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE PO Box 2322 Austin, TX 78768			Date Hand-delivered or Date Postmarked	
				Receipt # Amount	
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Sounthaly				
	NICKNAME LAST SUFFIX Outhavong				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1719 Deerfield Dr Austin, TX 78741				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 518-3666				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/01/2022 09/29/2022				
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) None		12 OFFICE SOUGHT (if known) Council Member, District 9 District 9		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Wald, Thomas E.	14 Filer ID (Ethics Commission Filers) 00090823
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,470.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 11,886.01
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 23,087.32
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,109.64

17 AFFADAVIT		
<p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</p> <div style="display: flex; justify-content: center; align-items: center;"><div style="text-align: center; margin-right: 20px;">Thomas E. Wald</div><div style="border-top: 1px solid black; width: 300px;"></div></div> <p style="text-align: center;">Signature of Candidate or Officeholder</p>		
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.		
_____ Signature of officer administering	_____ Printed name of officer administering	_____ Title of officer administering oath

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

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18 FILER NAME Wald, Thomas E.		19 Filer ID (Ethics Commission Filers) 00090823
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,470.00
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	\$ 172.93
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 11,886.01
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: 1/7 Rpt: 4/20
2 FILER NAME Wald, Thomas E.		3 Filer ID (Ethics Commission Filers) 00090823
4 Date 08/07/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Addison, Doug <hr/> 6 Contributor address; City; State; Zip Code 1307 W 40th St Austin, TX 78756-3614	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) UT Austin
Date 09/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Addison, Doug <hr/> Contributor address; City; State; Zip Code 1307 W 40th St Austin, TX 78756-3614	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) UT Austin
Date 08/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bednar, Deaton <hr/> Contributor address; City; State; Zip Code 4103 Avenue G Austin, TX 78751-4709	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CHIEF BOTTLE WASHER		Employer (See Instructions) TEXAS BIKE TOURS
Date 08/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, Aj <hr/> Contributor address; City; State; Zip Code 5015 Duval St Austin, TX 78751-2538	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retail store owner		Employer (See Instructions) The Peddler
Date 07/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cofer, George <hr/> Contributor address; City; State; Zip Code 3306 Gentry Dr Austin, TX 78746-5507	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Self Employed		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: 2/7 Rpt: 5/20
2 FILER NAME Wald, Thomas E.		3 Filer ID (Ethics Commission Filers) 00090823
4 Date 07/04/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowles, Michael <hr/> 6 Contributor address; City; State; Zip Code 303 Linden St Austin, TX 78702-4857	7 Amount of Contribution (\$) \$80.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Department of Justice
Date 07/03/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Jessica <hr/> Contributor address; City; State; Zip Code 5638 NW Fair Oaks Dr Corvallis, OR 97330-3115	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed
Date 08/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falk, David <hr/> Contributor address; City; State; Zip Code 8101 Forest Mesa Dr Austin, TX 78759-8713	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) STATE OF TEXAS
Date 09/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farr, Robert <hr/> Contributor address; City; State; Zip Code 7500 Chelmsford Dr Austin, TX 78736-3044	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fialkoff, Jason <hr/> Contributor address; City; State; Zip Code 1232 Lakeview Blvd E Seattle, WA 98102-4313	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) City of Seattle

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/7 Rpt: 6/20
2 FILER NAME Wald, Thomas E.		3 Filer ID (Ethics Commission Filers) 00090823
4 Date 08/25/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fineberg, Lou <hr/> 6 Contributor address; City; State; Zip Code 204 S Mathilda St Pittsburgh, PA 15224-1605	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Accounts Manager		9 Employer (See Instructions) Dero
Date 09/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Carol <hr/> Contributor address; City; State; Zip Code 2401 Bryan St Austin, TX 78702-2807	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Urban Planner		Employer (See Instructions) Sustainability Solutions Group USA Inc.
Date 09/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goff, Eric <hr/> Contributor address; City; State; Zip Code 404 Rio Grande St Austin, TX 78701-2789	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Goff Policy
Date 08/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Elizabeth <hr/> Contributor address; City; State; Zip Code 2100 Mountain View Rd Austin, TX 78703-2206	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) STATE OF TEXAS
Date 09/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg, Randy <hr/> Contributor address; City; State; Zip Code 4711 Spicewood Springs Rd Unit 234 Austin, TX 78759-8431	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT Services manager		Employer (See Instructions) IBM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/7 Rpt: 7/20
2 FILER NAME Wald, Thomas E.		3 Filer ID (Ethics Commission Filers) 00090823
4 Date 09/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handal, Edgar <hr/> 6 Contributor address; City; State; Zip Code 1003 Linden St Unit A Austin, TX 78702-3630	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Computer Engineer		9 Employer (See Instructions) NVIDIA
Date 07/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Libal, Robert <hr/> Contributor address; City; State; Zip Code 904 Capitol Ct Austin, TX 78756-2703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) non profit consultant		Employer (See Instructions) Self Employed
Date 09/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElroy, Ryan <hr/> Contributor address; City; State; Zip Code 301 West Ave Apt 1008 Austin, TX 78701-4778	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 08/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Placette, Sam <hr/> Contributor address; City; State; Zip Code 49 Brook Cir Boulder, CO 80302-9431	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) ThreatX
Date 08/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poteet, Brian <hr/> Contributor address; City; State; Zip Code 405 W North Loop Blvd Unit 1 Austin, TX 78751-1923	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Cutsforth Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/7 Rpt: 8/20
2 FILER NAME Wald, Thomas E.		3 Filer ID (Ethics Commission Filers) 00090823
4 Date 08/19/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pudhorodsky, Corey <hr/> 6 Contributor address; City; State; Zip Code 1702 Clifford Ave Austin, TX 78702-1635	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) TECH GTD JUNKIE KITE FLYER #VIRGINIATECH		9 Employer (See Instructions) @COREYPUD
Date 08/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayer, Jim <hr/> Contributor address; City; State; Zip Code 435 Mcleod Ave Missoula, MT 59801-4404	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Nonprofit consultant		Employer (See Instructions) Self Employed
Date 09/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seal, Eli <hr/> Contributor address; City; State; Zip Code 6901 Columbia Dr Austin, TX 78723-1322	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Mears
Date 08/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelley, Carolyn <hr/> Contributor address; City; State; Zip Code 6400 Middleham Pl Austin, TX 78745-3952	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamburri, Valerie <hr/> Contributor address; City; State; Zip Code 118 Carver St Elgin, TX 78621-3241	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) TreeFolks

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/7 Rpt: 9/20
2 FILER NAME Wald, Thomas E.		3 Filer ID (Ethics Commission Filers) 00090823
4 Date 09/17/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Travis, Shiloh <hr/> 6 Contributor address; City; State; Zip Code 3707 Basford Rd Austin, TX 78722-1307	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Home builder		9 Employer (See Instructions) Self Employed
Date 09/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virani, Alim <hr/> Contributor address; City; State; Zip Code 1621 E 6th St Austin, TX 78702-3300	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Eng Manager		Employer (See Instructions) Twitter
Date 08/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wald, Robert <hr/> Contributor address; City; State; Zip Code 6400 Middleham Pl Austin, TX 78745-3952	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Addie <hr/> Contributor address; City; State; Zip Code 3840 Far West Blvd Austin, TX 78731-3068	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Advocacy Program Manager		Employer (See Instructions) Black+Vernooy Architecture and Urban Design
Date 08/16/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Brita <hr/> Contributor address; City; State; Zip Code PO Box 42544 Austin, TX 78704-0042	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self Employed real estate development		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: 7/7 Rpt: 10/20
2 FILER NAME Wald, Thomas E.		3 Filer ID (Ethics Commission Filers) 00090823
4 Date 08/07/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wise, Steven <hr/> 6 Contributor address; City; State; Zip Code 402 W North Loop Blvd # A Austin, TX 78751-1924	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Chadwick <hr/> Contributor address; City; State; Zip Code 1004 E 15th St # B Austin, TX 78702-1027	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Self Employed

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 11/20	
2 FILER NAME Wald, Thomas E.		3 Filer ID (Ethics Commission Filers) 00090823	
4 TOTAL OF UNITEMIZED LOANS			\$
5 Date of loan 07/01/2022	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Wald, Tom		9 Loan Amount (\$) \$159.90
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 4016 Maplewood Ave Austin, TX 78722-1518		10 Interest Rate
			11 Maturity Date
12 Principal occupation / Job title (See Instructions) Executive Director		13 Employer (See Instructions) Red Line Parkway Initiative	
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input 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)	
Date of loan 07/05/2022	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Wald, Tom		Loan Amount (\$) \$13.03
Is lender a financial institution? No	Lender address; City; State; Zip Code 4016 Maplewood Ave Austin, TX 78722-1518		Interest Rate
			Maturity Date
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Red Line Parkway Initiative	
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>	
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code		
Principal occupation		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: 1/9 Rpt: 12/20	2 FILER NAME Wald, Thomas E.	3 Filer ID (Ethics Commission Filers) 00090823
4 Date 07/26/2022	5 Payee name Amazon.com Services LLC	
6 Amount (\$) \$40.46	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109-5210	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/27/2022	Payee name Amazon.com Services LLC	
Amount (\$) \$25.74	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109-5210	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/30/2022	Payee name Amazon.com Services LLC	
Amount (\$) \$31.18	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109-5210	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 2/9 Rpt: 13/20	2 FILER NAME Wald, Thomas E.	3 Filer ID (Ethics Commission Filers) 00090823
4 Date 08/18/2022	5 Payee name Austin AFL-CIO Council	
6 Amount (\$) \$215.00	7 Payee address; City; State; Zip Code PO Box 301074 Austin, TX 78703-0018	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertisement in 2022 Austin Central Labor Council Labor Day program
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/02/2022	Payee name Austin AFL-CIO Council	
Amount (\$) \$12.24	Payee address; City; State; Zip Code PO Box 301074 Austin, TX 78703-0018	
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 Ticket to 2022 Austin Central Labor Council Labor Day Fish Fry
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/24/2022	Payee name Checkmark Typesetting	
Amount (\$) \$4,838.01	Payee address; City; State; Zip Code 3217 N Interstate 35 Austin, TX 78722-2203	
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 Printing yard signs road signs business cards name badges
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: 3/9 Rpt: 14/20	2 FILER NAME Wald, Thomas E.	3 Filer ID (Ethics Commission Filers) 00090823
4 Date 08/23/2022	5 Payee name City of Austin	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 301 W 2nd St Austin, TX 78701-4652	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing fee for November 2022 Election
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/02/2022	Payee name Collective Campaigns	
Amount (\$) \$1,129.00	Payee address; City; State; Zip Code 9901 Brodie Ln Ste # 160 Austin, TX 78748-5892	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/19/2022	Payee name Collective Campaigns	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 9901 Brodie Ln Ste # 160 Austin, TX 78748-5892	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Services
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: 4/9 Rpt: 15/20	2 FILER NAME Wald, Thomas E.	3 Filer ID (Ethics Commission Filers) 00090823
4 Date 09/19/2022	5 Payee name Collective Campaigns	
6 Amount (\$) \$50.54	7 Payee address; City; State; Zip Code 9901 Brodie Ln Ste # 160 Austin, TX 78748-5892	
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 Supplies for volunteer events
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/01/2022	Payee name Google LLC	
Amount (\$) \$11.51	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace account - monthly
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/05/2022	Payee name Google LLC	
Amount (\$) \$13.03	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Voice account - monthly
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/9 Rpt: 16/20	2 FILER NAME Wald, Thomas E.	3 Filer ID (Ethics Commission Filers) 00090823
4 Date 08/01/2022	5 Payee name Google LLC	
6 Amount (\$) \$11.51	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace account - monthly
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/01/2022	Payee name Google LLC	
Amount (\$) \$13.61	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Voice account - monthly
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2022	Payee name Google LLC	
Amount (\$) \$11.51	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace account - monthly
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: 6/9 Rpt: 17/20	2 FILER NAME Wald, Thomas E.	3 Filer ID (Ethics Commission Filers) 00090823
4 Date 09/01/2022	5 Payee name Google LLC	
6 Amount (\$) \$13.58	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Voice account - monthly
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2022	Payee name Hotcards	
Amount (\$) \$355.70	Payee address; City; State; Zip Code 22 N Main St FI 2 Chagrin Falls, OH 44022-3006	
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 printing door hangers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/01/2022	Payee name NGP VAN	
Amount (\$) \$159.90	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense NGP VAN account - monthly
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: 7/9 Rpt: 18/20	2 FILER NAME Wald, Thomas E.	3 Filer ID (Ethics Commission Filers) 00090823
4 Date 08/04/2022	5 Payee name NGP VAN	
6 Amount (\$) \$159.90	7 Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense NGP VAN account - monthly
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/02/2022	Payee name NGP VAN	
Amount (\$) \$159.90	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense NGP VAN account - monthly
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/02/2022	Payee name Paragon Payment Solutions	
Amount (\$) \$164.90	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Merchant 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: 8/9 Rpt: 19/20	2 FILER NAME Wald, Thomas E.	3 Filer ID (Ethics Commission Filers) 00090823
4 Date 09/02/2022	5 Payee name Paragon Payment Solutions	
6 Amount (\$) \$36.40	7 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Merchant fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/25/2022	Payee name Texas Democratic Party	
Amount (\$) \$540.00	Payee address; City; State; Zip Code PO Box 15707 Austin, TX 78761-5707	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) VAN - Texas Voter File	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense VAN - Texas Voter File
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2022	Payee name The Home Depot #6542	
Amount (\$) \$409.14	Payee address; City; State; Zip Code 3600 S I-35 Frontage Rd S Austin, TX 78704	
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 Supplies to install road signs
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: 9/9 Rpt: 20/20	2 FILER NAME Wald, Thomas E.	3 Filer ID (Ethics Commission Filers) 00090823
4 Date 08/09/2022	5 Payee name United States Postal Service	
6 Amount (\$) \$60.00	7 Payee address; City; State; Zip Code 823 Congress Ave Ste 150 Austin, TX 78701-2545	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 stamps
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/26/2022	Payee name VistaPrint	
Amount (\$) \$24.89	Payee address; City; State; Zip Code 275 Wyman St Waltham, MA 02451-1200	
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 Check printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2022	Payee name Worley Printing Co. Inc.	
Amount (\$) \$398.36	Payee address; City; State; Zip Code 3217 N Interstate 35 Austin, TX 78722-2203	
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 printing door hangers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held