CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	Filer ID (Ethi	ics Commission Filers)	2 Total pages filed:			OFFICE	ICE ONLY
-	00090843	ics commission r hers)	18			Date Received	JSE ONLY
3	CANDIDATE /	MS / MRS / MR	FIRST		MI	ELECTRONICA	VIIVEILED
Ŭ	OFFICEHOLDER	WICO / WITC	Clinton S.		1411	10/11/2022	ALLY FILED
	NAME	NICKNAME	LAST		SUFFIX	10/11/2022	
		INICINIANIE	Rarey		301117		
4	ORIGINAL	January 15	Runoff	Other (s	pecify)	Date Hand-delivered or	r Date Postmarked
	REPORT TYPE	July 15	Exceeded modified	ш	. ,,	Receipt #	Amount
		X 30th day before election	15th day after camp	paign treasurer		1	
		8th day before election	appointment (office	**		Date Processed	•
_	ODICINIAL DEDICE		<u> </u>	<u> </u>	Vasu	_	
5	ORIGINAL PERIOD COVERED	Month Day Yea 07/01/2022	ar THROUGH	Month Day 10/09/2022	Year	Date Imaged	
6	EXPLANATION OF C			10/09/2022		<u>!</u>	
٥	Last minute donation	ONNECTION					
	Last miliate dellation						
7	AFFIDAVIT		Isw	ear, or affirm, under pe	enalty of periury	v. that this corrected	d report is true
				correct.		,,	
			Che	ck the box next to any	and all applica	ble statements:	
			_				
				Semiannual reports was made in good fa			
				misrepresent the info			3 01 10
			X	Other reports: I s report not later than the			
				that the report as orig	ginally filed is ir	naccurate or incomp	olete. I
				swear, or affirm, that filed was made in go	t any error or or ood faith	nission in the report	t as originally
				ou was made in go	ou raith		
					Clinton S. F	Rarey	
				Signatu	re of Candidate	e or Officeholder	<u> </u>
	AFFIX NOTARY ST	AMP / SEAL ABOVE					
	Sworn to and subsc	ribed before me, by the sai	d	hand and the state of	, this t	he	day
	of	, 20, to cer	tity which, witness my l	nand and seal of office	9.		
	Signature of office	er administering oath	Printed name of of	fficer administering oat	th .	Title of officer admir	nistering oath
	Signature of Office	or administering batti	i integriante di di	noor administering bal		The or officer admit	notoring outil

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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple	te this form.	1 Filer ID (Ethics Comm 00090843		2 Total pages filed: 18
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME		Clinton S.			Date Received
					ELECTRONICALLY FILED
	NICKNAME	LAST		SUFFIX	···· <mark>10/11/2022</mark>
		Rarey			
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE#; CIT	Y;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING	11621 murron drive				Receipt # Amount
ADDRESS	A				
Change of Address	Austin, TX 78754				Date Processed
					Date Imaged
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI	
NAME	1	Christina A.			
	NICKNAME	LAST		SUFFIX	
		Rarey			
6 CAMPAIGN	STREET ADDRESS (NO PO E	BOX PLEASE);	AP	T / SUITE #; CITY	; STATE; ZIP CODE
TREASURER ADDRESS	11621 murron drive				
(Residence or Business)	Austin, TX 78754				
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	EXTENSION		
TREASURER PHONE	(512) 221-3245				
8 REPORT TYPE	January 15	30th day before	election	Runoff	15th day after campaign treasurer
		-	ᆜ	L	appointment (officeholder only)
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year
COVERED	07/01/2022	TH	IROUGH	10/09/20	22
10 ELECTION	ELECTION DATE			ELECTION TYPE	
	Month Day Year 11/08/2022	P	rimary	Runoff	Other
	11/06/2022	XG	eneral	Special	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	T (if known)
					er, District 1 Place Austin District 1
	•			•	
		GO T	O PAGE 2		
		GO 1	O FAGE Z		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

3 of 18

13 C / OH NAME	Rarey, Clinton S.		14 Filer ID 00090843	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expend These expenditures may have been made without I officeholders are required to report this informat	ıt the candidate's or offic	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
Ш	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS	
16 CONTRIBUTION TOTALS		 AL CONTRIBUTIONS OF \$50 OR LESS (OTHEF ARANTEES OF LOANS), UNLESS ITEMIZED	R THAN PLEDGES,	\$ 0.00
	\$ 3,915.00			
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLES	SS ITEMIZED	\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 3,846.03
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 525.88
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	\$ 0.00
17 AFFADAVIT				
		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information required	
			Clinton S. Rarey	
		Signature	of Candidate or Officeho	older
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
		aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of office	eer administering	Printed name of officer administering	Title of office	er administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				JVLK 31	4 of 18
l	ER NAN rey, Cli	nton S.	19 Filer ID 00090843	(Ethics Com	nmission Filers)
l		E SUBTOTALS SCHEDULE		SUBTO	OTAL AMOUNT
1.	1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS				3,915.00
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS				
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS				
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	3,846.03
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS			\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$	

	MONEI	ARY POLITICAL CONTRIBUTION	Or	15		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 1/7 Rpt: 5/18	
2	FILER NAME Rarey, Clinto	n S.			3	Filer ID (Ethics Commission 00090843	n Filers)
4	Date 07/19/2022	Alexander, Wiley (Mr.) 6 Contributor address; City; State; Zip Code 6714 Tulsa Cove		7	Amount of Contribution (\$)	\$50.00	
8	Principal occu Owner	Austin, TX 78723 pation / Job title (See Instructions)	9	Employer (See Instructions Coyote Moss Landscap			
	Date 08/18/2022	Full name of contributor out-of-state PAC (ID# Black, David (Mr.) Contributor address; City; State; Zip Code 6217 John Chisum Lane Austin, TX 78749	t:			Amount of Contribution (\$)	\$100.00
	Principal occu Instructor	pation / Job title (See Instructions)		Employer (See Instructions Doulos Inc	5)		
	Date 10/02/2022	Full name of contributor out-of-state PAC (ID# Brown, Michael (Mr.) Contributor address; City; State; Zip Code 8105 Elkhorn mtn. trail Austin, TX 78729	t:)		Amount of Contribution (\$)	\$50.00
	Principal occu transportatio	pation / Job title (See Instructions)		Employer (See Instructions Huitt-Zollars	<u> </u>		
	Date 09/08/2022	Full name of contributor out-of-state PAC (ID# Coffman, Dewey (Mr.) Contributor address; City; State; Zip Code 12704 Palfrey Drive Austin, TX 78727	t:)		Amount of Contribution (\$)	\$100.00
	Principal occu Self	oation / Job title (See Instructions)	Employer (See Instructions) Self				
	Date O7/16/2022 Full name of contributor out-of-state PAC (ID#:) Coleman, Kristen (Mrs.) Contributor address; City; State; Zip Code 12700 Bismark Drive Austin, TX 78748			Amount of Contribution (\$)	\$50.00		
	Principal occu Sales	oation / Job title (See Instructions)		Employer (See Instructions Survey Monkey	5)		
			•				

	MONEI	ARY POLITICAL CONTRIB	BUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete	e this for	n.	1	Total pages Schedule A1: Sch: 2/7 Rpt: 6/18	
2	FILER NAME Rarey, Clinto	n S.			3	Filer ID (Ethics Commission 00090843	n Filers)
4	Date 09/28/2022			7	Amount of Contribution (\$)	\$100.00	
8	Principal occu Sales	Austin, TX 78739 pation / Job title (See Instructions)	9	Employer (See Instructions Sales	5)		
	Date 08/26/2022	Full name of contributor out-of-state F Dixon, Sarah (Mr.) Contributor address; City; State; Zip Code 5003 Lott Avenue Austin, TX 78721	PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		pation / Job title (See Instructions) keting Manager		Employer (See Instructions Amazon	5)		
	Date 09/30/2022	Full name of contributor out-of-state F Duncan, Sally (Mrs.) Contributor address; City; State; Zip Code 2503 Broken oak Drive	PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu	Austin, TX 78745 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Retired			Retired	<u></u>		
	Date 09/08/2022	Full name of contributor out-of-state F Garza, David Contributor address; City; State; Zip Code 824 Camino La Costa Apt 418 Austin, TX 78752	PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions State Government	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/29/2022 Gonzalez, Car (Mr.) Contributor address; City; State; Zip Code 4009 Victory drive d202 Austin, TX 78704			Amount of Contribution (\$)	\$200.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Pleblab	5)		

	MONEI	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/7 Rpt: 7/18	
2	FILER NAME Rarey, Clinto	on S.			3	Filer ID (Ethics Commission 00090843	n Filers)
4	Date 09/22/2022	 5 Full name of contributor Harris, Suzanne (Mrs.) 6 Contributor address; City; S 301 Bent Tree Court 	out-of-state PAC (ID#:_ tate; Zip Code)	7	Amount of Contribution (\$)	\$400.00
8	Principal occu Retired	West lake Hills, TX 78746 pation / Job title (See Instructions		Employer (See Instructions Retired	5)		
	Date 09/22/2022	Full name of contributor Hickerson, Janet (Mrs.) Contributor address; City; S 222 west ave unit 1301 Austin, TX 78701	out-of-state PAC (ID#:_		•	Amount of Contribution (\$)	\$100.00
Principal occupation / Job title (See Instructions) Business owner Employer (See Instructions) Self		Employer (See Instructions Self	s)				
	Date 09/24/2022	Full name of contributor Howard, Ruth (Mrs.) Contributor address; City; S 4900 Interlachen Lane	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$25.00
		Austin, TX 78747 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> s)		
Date Full name of contributor out-of-state PAC (ID#:_ 09/26/2022 Ireland, Debra (Mrs.) Contributor address; City; State; Zip Code PO Box 632558)	•	Amount of Contribution (\$)	\$400.00		
	Principal occu Timber Farm	Nacogdoches, TX 75963 pation / Job title (See Instructions	s)	Employer (See Instructions Self	<u>I</u> S)		
	Date 07/12/2022	Full name of contributor Johnson, William (Mr.) Contributor address; City; S 10123 Dianella Lane Austin, TX 78759	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$25.00
	Principal occu retired	pation / Job title (See Instructions	5)	Employer (See Instructions retired	S)		

	MONEI	ARY POLITICAL C	CONTRIBUTIO	N	IS .		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 4/7 Rpt: 8/18	
2	FILER NAME Rarey, Clinto	on S.				3	Filer ID (Ethics Commission 00090843	n Filers)
4	Date 09/08/2022	6 Contributor address; City; State; Zip Code 7033 Viridian Lane		7	Amount of Contribution (\$)	\$40.00		
8	Principal occu Self	Austin, TX 78739 pation / Job title (See Instructions)	9	Employer (See Instructions Self	<u> </u> s)		
	Date Full name of contributor out-of-state PAC (ID#:) 08/30/2022 Kestranek, Gregg (Mr.) Contributor address; City; State; Zip Code 7008 Fireoak drive Austin, TX 78759			Amount of Contribution (\$)	\$25.00			
	Principal occu Information ⁻	pation / Job title (See Instructions Fechnology)		Employer (See Instructions US Federal Govt	s)		
	Date 10/09/2022	Full name of contributor Koenig, Steven Contributor address; City; St 11621 Chestnut Avenue	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$50.00
		Austin, TX 78702 pation / Job title (See Instructions)		Employer (See Instructions Total Comfort	<u> </u> s)		
	Tech Date Full name of contributor out-of-state PAC (ID#: 09/18/2022 Mcnaul, Sandy Contributor address; City; State; Zip Code 6720 Roseborough drive Austin, TX 78747)		Amount of Contribution (\$)	\$150.00	
	Principal occu Self	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date O7/28/2022 Full name of contributor out-of-state PAC (ID#:) NW Austin Republican Women Contributor address; City; State; Zip Code 8600 Balcones Club Dr Austin, TX 78750					Amount of Contribution (\$)	\$250.00	
	Principal occupation / Job title (See Instructions) Employer (See Instru			Employer (See Instructions	5)			

	MONEI	ARY POLITICAL CONTRIBUT	IOI	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	s for	rm.	1	Total pages Schedule A1: Sch: 5/7 Rpt: 9/18	
2	FILER NAME Rarey, Clinto	on S.			3	Filer ID (Ethics Commission 00090843	n Filers)
4	Date 07/12/2022	Ogden, Susan (Mrs.) 6 Contributor address; City; State; Zip Code 2302 W 10th street		7	Amount of Contribution (\$)	\$400.00	
8	Principal occu retired	Austin, TX 78703-3845 pation / Job title (See Instructions)	9	Employer (See Instructions retired) s)		
	Date 08/08/2022				Amount of Contribution (\$)	\$100.00	
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	s)		
	Date 08/25/2022	Full name of contributor out-of-state PAC (ID Perez, Cynthia (Mrs.) Contributor address; City; State; Zip Code 2215 Rick Whinery drive Austin, TX 78728	#:)	•	Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u> </u>		
Retired Date O8/26/2022 Full name of contributor out-of-state PAC (ID#: Powell, Jennifer (Mrs.) Contributor address; City; State; Zip Code 2311 Balboa Road Austin, TX 78746)		Amount of Contribution (\$)	\$20.00		
	Principal occu Homemaker	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date O9/20/2022 Proett, James (Mr.) Contributor address; City; State; Zip Code 2107 East 13th street Austin, TX 78702		•	Amount of Contribution (\$)	\$10.00		
	Principal occu Software Eng	pation / Job title (See Instructions) gineer		Employer (See Instructions LTK	s)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how t	o complete this fo	rm.	1	Total pages Schedule A1: Sch: 6/7 Rpt: 10/18	
2	FILER NAME Rarey, Clinto	on S.			3	Filer ID (Ethics Commission 00090843	n Filers)
4	Date 10/08/2022	 5 Full name of contributor Proett, James (Mr.) 6 Contributor address; City; Stat 2107 East 13th street 	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Austin, TX 78702 pation / Job title (See Instructions)	<u></u>	9 Employer (See Instructions	 s)		
	Software Eng	gineer		LTK			
	Date Full name of contributor out-of-state PAC (ID#:) Renvers, Linda (Mrs.) Contributor address; City; State; Zip Code 20 Pinehurst Manor Apt A Pinehurst, NC 28374			Amount of Contribution (\$)	\$50.00		
	Principal occup Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 07/12/2022	Full name of contributor Ryan, Nolan (Mr.) Contributor address; City; Stat 3813 Agape Lane Austin, TX 78735	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Chairman	,		R Bank			
Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$300.00		
	Principal occup Dentist	pation / Job title (See Instructions)		Employer (See Instructions Star Dental	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/08/2022 Spataro, Susan Contributor address; City; State; Zip Code 6628 Haswell Lane Austin, TX 78749			Amount of Contribution (\$)	\$200.00		
	Principal occupretired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		

	MONEI	ARY POLITICAL CO	NIRIBUTION	15		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this for	m.	1	Total pages Schedule A1: Sch: 7/7 Rpt: 11/18	
2	FILER NAME Rarey, Clinto	on S.			3	Filer ID (Ethics Commission 00090843	n Filers)
4	Date 09/13/2022	Taylor, Kendrick (Monsignor) 6 Contributor address; City; State; Zip Code 7412 Ashcrest Lane		7	Amount of Contribution (\$)	\$100.00	
8	Principal occu Retired	Dallas, TX 75249 pation / Job title (See Instructions)	9	Employer (See Instructions Retired	;)		
	Date Full name of contributor out-of-state PAC (ID#:) 08/08/2022 Virden, Jennifer (Mr.) Contributor address; City; State; Zip Code 8307 High Oak Drive Austin, TX 78759			Amount of Contribution (\$)	\$200.00		
Principal occupation / Job title (See Instructions) Real Estate Broker Employer (See Instructions) Self		Employer (See Instructions Self	5)				
	Date 08/29/2022	Full name of contributor White, Dawn (Mrs.) Contributor address; City; State; 2900 Sunridge drive apt 212	out-of-state PAC (ID#: ; Zip Code)		Amount of Contribution (\$)	\$10.00
		Austin, TX 78741 pation / Job title (See Instructions) Manager		Employer (See Instructions Aloha Dental	5)		
	Operations Manager Date Full name of contributor out-of-state PAC (ID#: 07/28/2022 Winchester, Raymond (Mr.) Contributor address; City; State; Zip Code 9236 Locarno Drive Dallas, TX 75243					Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u>(</u>		
	Date Full name of contributor out-of-state PAC (ID#:) 09/01/2022 Zito, Carin (Mr.) Contributor address; City; State; Zip Code 4445 River Garden Trail Austin, TX 78746			Amount of Contribution (\$)	\$100.00		
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
			·				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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)

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 1/7 Rpt: 12/18	Rarey, Clinton S.	00090843
4	Date	5 Payee name	•
	10/08/2022	Anedot Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$143.90	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Transaction Fees
			Transaction 1 ccs
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Cinde field
	Date	Payee name	
	08/08/2022	Canva	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$12.99	200 E 6th Street	
	Ψ12.55	200 L our Street	
		Auctin TV 70701	
		Austin, TX 78701	
	PURPOSE OF	2 (() () () () () () () () ()	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
			Marketing Software
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	09/06/2022	Canva	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$12.99	200 E 6th Street	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Marketing Design Software
			mandary besign conware
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		SSS Noid

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide ex	Salaries/W	kpense /ages/Contract Labor	Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:					3 Filer ID	(Ethics Commission Filers)
	Sch: 2/7 Rpt: 13/18	Rarey, Clir				00090843	
4	Date	5 Payee name	е				
Ļ	10/06/2022	Canva					
6	Amount (\$)	7 Payee addr	•	State; Zip Co	de		
	\$12.99	200 E 6th	Sueel				
		Austin, TX	78701				
8	PURPOSE	(a) Category (See Categories listed at the top of	this schedule)	(b) Description		
	OF EXPENDITURE	Advertisino	g Expense		=	I outside of Texas. Comp n, TX, officeholder living	
					ш	esign Software	
					-		
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ght	Office he	eld
	Date	Payee name	 e				
	09/28/2022	HighLevel	Agency				
	Amount (\$)	Payee addr	ess; City;	State; Zip Co	de		
	\$194.00	400 North	Saint Paul Street				
		Suite 920					
L		Dallas, TX	75201				
	PURPOSE OF		See Categories listed at the top of		(b) Description		
	EXPENDITURE	Office Ove	rhead/Rental Expense		=	I outside of Texas. Comp n, TX, officeholder living	
					CRM		•
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ght	Office he	eld
	Date	Payee name	e				
L	09/23/2022	Home Dep	oot				
	Amount (\$)	Payee addr	•	State; Zip Co	de		
	\$142.86	2455 Pace	es Ferry Road SE				
		Atlanta, G	A 30339				
	PURPOSE OF		See Categories listed at the top of		(b) Description		
	EXPENDITURE	Yard Stake campaign	es and 2x4's to build fra	ame for 4x8		I outside of Texas. Comp n, TX, officeholder living	
		campaign	Signo				ild frame for 4x8
					campaign si	gns	
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ght	Office he	eld
							\/i\/0.4.0050000

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees C Food/Beverage Expense P Gift/Awards/Memorials Expense P Legal Services S	Office Overhead Polling Expense Printing Expens Salaries/Wages	e /Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
	·	The Instruction Guide explains ho	w to comple	te this form.			
1	Total pages Schedule F1:				3	Filer ID	(Ethics Commission Filers)
	Sch: 3/7 Rpt: 14/18	Rarey, Clinton S.			00090843		
4	Date	5 Payee name					
	10/06/2022	Murf Studio					
6	Amount (\$)	7 Payee address; City; State; 2	Zip Code				
	\$39.00	341 South Main Street, Suite 500 Salt Lake City, UT 84111					
_		-	10.				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Advertising Expense	_{ile)} (b)	느	, TX	ide of Texas. Com , officeholder living I Voice Gene	gexpense
9	Complete ONLY if direct expenditure to benefit C/OF		ce sought			Office he	eld
	Date	Payee name					
	09/13/2022	Office Depot					
	Amount (\$)	Payee address; City; State; 2	Zip Code				
	\$50.21	19000 Limestone Commercial Dr, Unit 50	00				
		pflugerville, TX 78660	la.				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedu	_{ile)} (b)	Description	nute	ide of Texas. Com	nlete Schedule T
	EXPENDITURE	Office Overhead/Rental Expense		=		, officeholder living	
				Office Supplie	es		
				Paper			
	Complete ONLY if direct expenditure to benefit C/Oh		ce sought			Office he	eld
	Date	Payee name					
	09/19/2022	Office Depot					
	Amount (\$)	Payee address; City; State; 2	Zip Code				
	\$227.08	19000 Limestone Commercial Dr, Unit 50	00				
		pflugerville, TX 78660	ı				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Office Overhead/Rental Expense	(b)	<u> </u>	, TX	ide of Texas. Com , officeholder living	•
	Complete ONLY if direct expenditure to benefit C/Oh		ce sought			Office he	eld

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
<u> </u>		· · · · · · · · · · · · · · · · · · ·	
1	Total pages Schedule F1:)
	Sch: 4/7 Rpt: 15/18	Rarey, Clinton S. 00090843	
4	Date	5 Payee name	
	09/21/2022	Restaurant Depot	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$543.58	820 Blackson Ave	
		Austin, TX 78752	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Food for community BBQ	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	Н	
H	Date	Payee name	
	09/22/2022	Restaurant Depot	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$166.61	820 Blackson Ave	
	,		
		Austin, TX 78752	
	DUDDOCE		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Toyas, Complete Schedule Toyas, Comp	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Food - Community BBQ	
		1 ood Community BBQ	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	y	
\vdash	Data	Davida nama	
	Date 08/12/2022	Payee name Wayo Fingerprint Ideas	
		Wave Fingerprint Ideas	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$871.55	201 Taylor Street	
		Hutto, TX 78634	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Marketing Material -Door Hangers	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	CAPETIGITATE TO DETICITE C/OF	11	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations made by - Candidate/Officeholder/Political Committee Credit Card Payment				Legal Services					OTHER (enter a category not listed above)			
	Credit Card Payment			The Instruction C	Guide explains	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commissio	n Filers)
	Sch: 5/7 Rpt: 16/18		Rarey, Clinto	on S.						00090843		
4	Date	5	Payee name									
	09/02/2022		Wave Finge	rprint Ideas								
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Co	de					
	\$525.02		201 Taylor S	Street								
			Hutto, TX 78	8634								
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Printing Exp		are top or and corr	ouu.o,			outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITORE							—		officeholder livin	g expense	
								Marketing Ma	ater	iai		
_		L										
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	C	Office sou	ght			Office h	eld	
_		_										
	Date		Payee name									
	09/14/2022		Wave Finge	•								
	Amount (\$)		Payee addres		State;	Zip Co	de					
	\$143.97		201 Taylor S	Street								
			Hutto, TX 78	3634								
	PURPOSE OF	(a)	Category (Se	e Categories listed at	the top of this sch	edule)	(b)	Description				
	EXPENDITURE		Printing Exp	ense				=		de of Texas. Con officeholder livin	nplete Schedule T.	
								Small Market			у схренос	
									J			
	Complete ONLY if direct		Candidate/Offic	ceholder name	C	Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	10/07/2022		Wave Finge	rprint Ideas								
	Amount (\$)		Payee addres		State;	Zip Co	de					
	\$552.08		201 Taylor S	-	·	•						
			-									
			Hutto, TX 78	3634								
	PURPOSE	(a)		e Categories listed at	the ten of this eah	o dulo)	(b)	Description				
	OF	'	Printing Exp		the top of this sch	edule)	()		outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		- 5							officeholder livin		
								Door2Door m	ıark	ceting Mate	rial	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	C	Office sou	ght			Office h	eld	
	onpolicitate to beliefit 6/01	•										

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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 6/7 Rpt: 17/18	2 FILER NAME Rarey, Clinton S. 3 Filer ID (Ethics Commission Filers) 00090843
4 Date 10/06/2022	5 Payee name Wave Video Agency
6 Amount (\$) \$60.00	7 Payee address; City; State; Zip Code 2 Seaport Ln #8c Boston, MA 02210
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Video Editor
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 07/07/2022	Payee name Wix.com
Amount (\$) \$36.80	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 Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 08/04/2022	Payee name Wix.com
Amount (\$) \$36.80	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 Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee L	ift/Awards/Memorials egal Services The Instruction G			/ages/	Contract Labor	Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1: Sch: 7/7 Rpt: 18/18	l	FILER NAME Rarey, Clinto	n S.					Filer ID 00090843	(Ethics Commission Filers)
	Date 09/06/2022		Payee name Wix.com							
6	Amount (\$) \$36.80		6th floor	s; City; Francois BLVI so, CA 94158		Zip Co	de 			
8	PURPOSE OF EXPENDITURE			Categories listed at t ead/Rental Ex		edule)		=	de of Texas. Com officeholder living	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		Candidate/Offic	eholder name	C	Office sou	ght		Office he	eld
	Date 10/04/2022	l	Payee name Wix.com							
	Amount (\$) \$36.80		6th floor	s; City; Francois BLVI o, CA 94158		Zip Co	de			
	PURPOSE OF EXPENDITURE			Categories listed at t ead/Rental Ex		edule)		—	de of Texas. Com officeholder living	
	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Offic	eholder name	C	Office sou	ght		Office he	eld