CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

| The C/OH Instruction (| Guide explains how to compl | ete this form. | 1 Filer ID (Ethics Commi 00090755 | | 2 Total pages f | filed: 62 | |
|------------------------------------|-----------------------------|------------------|---|-------------------|----------------------------------|--------------------|--|
| 3 CANDIDATE / OFFICEHOLDER | MS / MRS / MR | FIRST Joah | | MI | OFFICE | USE ONLY | |
| NAME | | | | | Date Received ELECTRONIC | ALLY FILED | |
| | NICKNAME | LAST | | SUFFIX | 10/11/2022 | | |
| | | Spearman | | | | | |
| 4 CANDIDATE / | ADDRESS / PO BOX; APT | / SUITE #; CIT | Υ; | ZIP CODE | Date Hand-delivered | or Date Postmarked | |
| OFFICEHOLDER MAILING ADDRESS | 1503 West 10th Street | | | | Receipt # | Amount | |
| Change of Address | Austin, TX 78703 | | | | Date Processed | | |
| | | | | | Date Processed | | |
| | | | | | Date Imaged | | |
| 5 CAMPAIGN | MS / MRS / MR | FIRST | | MI | <u>.</u> | | |
| TREASURER NAME | | Jamund E. | | | | | |
| | NICKNAME | LAST | | SUFFIX | | | |
| | | Washington | | | | | |
| 6 CAMPAIGN | STREET ADDRESS (NO PO | BOX PLEASE); | AP ⁻ | Γ / SUITE #; CITY | ; ST | ATE; ZIP CODE | |
| TREASURER ADDRESS | 2712 Moreno Street | | | | | | |
| (Residence or Business) | Austin, TX 78723 | | | | | | |
| | | | | | | | |
| 7 CAMPAIGN | AREA CODE PHON | IE NUMBER E | EXTENSION | | | | |
| TREASURER PHONE | (512) 522-0502 | | | | | | |
| 8 REPORT TYPE | January 15 | 30th day before | election | Runoff | 15th day after ca | ampaign treasurer | |
| | July 15 | 3 8th day before | | Exceeded modified | appointment (of Final Report (At | | |
| | L July 15 | our day before 6 | election | reporting limit | Final Report (At | iacii C/On-PR) | |
| 9 PERIOD COVERED | Month Day Year | TL | IDOLICH | Month Day | Year | | |
| l coveries | 07/01/2022 | IF | IROUGH | 09/29/20 | 22 | | |
| 10 ELECTION | ELECTION DATE | | | ELECTION TYPE | | | |
| | Month Day Year 11/08/2022 | | rimary | Runoff | Other | | |
| | | XIG | eneral | Special | | | |
| 11 OFFICE | OFFICE HELD (if any) | 1 | | 12 OFFICE SOUGH | | | |
| | | | | Council Membe | er, District 9 | | |
| | , | | | 1 | | | |
| | GO TO PAGE 2 | | | | | | |

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 62

| 13 C / OH NAME | Spearman, Joah | | | 14 Filer ID 00090755 | (Ethics Cor | nmission Filers) |
|--|----------------------------------|----------------------|---|---|-------------------------------|-------------------------|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) | candidate / officeholder. | These expenditure | s may have been made i | xpenditures made by political without the candidate's or offi ormation only if they receive i | ceholder's kr | nowledge or |
| Additional Pages | COMMITTEE TYPE | COMMITTEE NA | ME | | | |
| _ | GENERAL | | | | | |
| | _ | COMMITTEE AD | DRESS | | | |
| | SPECIFIC | | | | | |
| | | COMMITTEE CA | MPAIGN TREASURER N | IAME | | |
| | | COMMITTEE CA | MPAIGN TREASURER A | DDRESS | | |
| 16 CONTRIBUTION TOTALS | | | NS OF \$50 OR LESS (C DANS), UNLESS ITEMIZE | THER THAN PLEDGES, ED | \$ | 0.00 |
| | \$ | 15,742.30 | | | | |
| EXPENDITURE TOTALS | 3. TOTAL POLITIC | AL EXPENDITURE | ES OF \$100 OR LESS, U | NLESS ITEMIZED | \$ | 310.49 |
| | | \$ | 44,269.28 | | | |
| CONTRIBUTION BALANCE | 5. TOTAL POLITIC REPORTING PE | | NS MAINTAINED AS OF | THE LAST DAY OF THE | \$ | 6,223.04 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIF OF THE REPOR | | ALL OUTSTANDING LOA | NS AS OF THE LAST DAY | \$ | 0.00 |
| 17 AFFADAVIT | | | | | | |
| | | | I swear, or affirm, under true and correct and inc under Title 15, Election | penalty of perjury, that the a ludes all information required Code. | ccompanyini I to be report | g report is ed by me |
| | | | | Joah Spearman | | |
| | | | Sign | ature of Candidate or Officeh | older | |
| AFFIX NO | TARY STAMP / SEAL AB | OVE | | | | |
| Sworn to and subso | | day | | | | |
| of | , 20, to co | ertify which, witnes | s my hand and seal of off | ïce. | | |
| Signature of office | cer administering | Printed name | e of officer administering | Title of offic | er administe | ring oath |
| | | | | | | |

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

| | | | | CC | OVER S | 3 of 62 |
|----|------|----------------|--|-----------------------------|-----------|-------------------|
| | | R NAN armar | ME n, Joah | 19 Filer ID 00090755 | (Ethics C | ommission Filers) |
| 20 | SCHI | EDULI | SUBTOTALS | | CLIE | BTOTAL AMOUNT |
| ı | NAM | E OF | SCHEDULE | | 301 | STOTAL AMOUNT |
| : | 1. | Х | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ | 15,742.30 |
| | 2. | | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | |
| ; | 3. | | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ | |
| 4 | 4. | | SCHEDULE E: LOANS | | \$ | |
| į | 5. | X | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | 6 | \$ | 43,346.99 |
| (| ô. | | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | |
| - | 7. | | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | DNS | \$ | |
| 8 | 3. | | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | |
| Ç | 9. | Х | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | | \$ | 922.29 |
| : | 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 | \$ | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|--------------------------------|---|---|----------------|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 1/22 Rpt: 4/62 | |
| 2 | FILER NAME Spearman, J | pah | | 3 | Filer ID (Ethics Commission 00090755 | n Filers) |
| 4 | Date 08/31/2022 | Full name of contributor out-of-state PAC (ID#:_Affinito, Christopher Contributor address; City; State; Zip Code 132 Web Isle Dr |) | 7 | Amount of Contribution (\$) | \$50.00 |
| 8 | Principal occu | Marble Falls, TX 78654-2858 Dation / Job title (See Instructions) | 9 Employer (See Instructions | <u> </u> ;) | | |
| | Date 07/20/2022 | Full name of contributor out-of-state PAC (ID#:_Alvarez, Robert Contributor address; City; State; Zip Code 425 Grace Ln Austin, TX 78746-4814 | | | Amount of Contribution (\$) | \$400.00 |
| | Principal occu CFO | oation / Job title (See Instructions) | Employer (See Instructions BigCommerce | 5) | | |
| | Date 07/07/2022 | Full name of contributor out-of-state PAC (ID#:_Anderson, Tara Contributor address; City; State; Zip Code 6520 Rimrock Rd | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | New Market, MD 21774-6636 pation / Job title (See Instructions) | Employer (See Instructions | - s) | | |
| | Date 09/28/2022 | Full name of contributor out-of-state PAC (ID#:_Baird, William Contributor address; City; State; Zip Code 2405 Coronado St Austin, TX 78702-3910 | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Executive | oation / Job title (See Instructions) | Employer (See Instructions PelotonU | 5) | | |
| | Date 09/20/2022 | Full name of contributor out-of-state PAC (ID#:_Baldinucci, Gabriel Contributor address; City; State; Zip Code 9217 Hopeland Dr Austin, TX 78749-5213 | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Self Employe | oation / Job title (See Instructions) rd | Employer (See Instructions Self Employed | 5) | | |
| | | | | | | |

| | MONEI | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|---------------------------|---|----------------------------------|----------------|---|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 2/22 Rpt: 5/62 | |
| 2 | FILER NAME Spearman, J | Joah | | ı | Filer ID (Ethics Commission 00090755 | า Filers) |
| 4 | Date 07/01/2022 | Full name of contributor out-of-state PAC (ID#:_Bingham, A.J. Contributor address; City; State; Zip Code 1212 Guadalupe St Apt 905 Austin, TX 78701-1808 | | 7 | Amount of Contribution (\$) | \$25.00 |
| 8 | Principal occu | 1 | 9 Employer (See Instructions) | <u>l</u> s) | | |
| | Date 09/27/2022 | Full name of contributor out-of-state PAC (ID#: Broadwater, Colby Contributor address; City; State; Zip Code 899 Westchester Rd Grosse Pointe Park, MI 48230-1827 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) | s) | | |
| | Date 09/29/2022 | Full name of contributor out-of-state PAC (ID#: Clark, Nicholas Contributor address; City; State; Zip Code 819 N Madison Ave | | • | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | Los Angeles, CA 90029-2801 pation / Job title (See Instructions) | Employer (See Instructions) | 5) | | |
| | Date 07/19/2022 | Full name of contributor out-of-state PAC (ID#: Collier, Sophia Contributor address; City; State; Zip Code 2 Bulkley Ave Sausalito, CA 94965-2208 | | | Amount of Contribution (\$) | \$150.00 |
| | Principal occu Manager | pation / Job title (See Instructions) | Employer (See Instructions) Self | <u> </u> | | |
| | Date 09/14/2022 | Full name of contributor out-of-state PAC (ID#: Collier, Sophia Contributor address; City; State; Zip Code 2 Bulkley Ave Sausalito, CA 94965-2208 | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu Manager | pation / Job title (See Instructions) | Employer (See Instructions) Self | 5) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|---------------------------|---|-------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 3/22 Rpt: 6/62 | |
| 2 | FILER NAME Spearman, J | loah | | 3 | Filer ID (Ethics Commission 00090755 | n Filers) |
| 4 | Date 09/22/2022 | 5 Full name of contributor out-of-state PAC (ID#:_Connolly, Colleen 6 Contributor address; City; State; Zip Code 1407 W 10th St Austin, TX 78703-4816 | | 7 | Amount of Contribution (\$) | \$50.00 |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions) |) | | |
| | Date 09/27/2022 | Full name of contributor out-of-state PAC (ID#:_ Costello, Amanda Contributor address; City; State; Zip Code 11507 Hilltop St Austin, TX 78753-2621 |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) |) | | |
| | Date 09/19/2022 | Full name of contributor out-of-state PAC (ID#:_ Craven Jr, Don Contributor address; City; State; Zip Code 3939 Bee Caves Rd |) | | Amount of Contribution (\$) | \$222.00 |
| | Principal occu | West Lake Hills, TX 78746-6431 pation / Job title (See Instructions) | Employer (See Instructions) |) | | |
| | Homemaker | | Aerendgast Capital LLC | | | |
| | Date 07/01/2022 | Full name of contributor |) | | Amount of Contribution (\$) | \$9.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/20/2022 | Full name of contributor out-of-state PAC (ID#:_ Cumberbatch, Virginia Contributor address; City; State; Zip Code 2940 Pannell St Austin, TX 78722-1415 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIONS | | SCHEDUL | E A1 |
|---|---------------------------|--|------|---|-------------|
| | The Instru | ction Guide explains how to complete this form. | 1 | Total pages Schedule A1: Sch: 4/22 Rpt: 7/62 | |
| 2 | FILER NAME Spearman, J | oah | 3 | Filer ID (Ethics Commission 00090755 | n Filers) |
| 4 | Date 07/01/2022 | Full name of contributor | 7 | Amount of Contribution (\$) | \$20.00 |
| 8 | Principal occu | Austin, TX 78726-1309 pation / Job title (See Instructions) 9 Employer (See Instructions) | ons) | | |
| | Date 09/24/2022 | Full name of contributor out-of-state PAC (ID#:) Damuth, Steven C. Contributor address; City; State; Zip Code PO Box 684909 Austin, TX 78768-4909 | | Amount of Contribution (\$) | \$35.00 |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instructions) | ons) | | |
| | Date 08/21/2022 | Full name of contributor out-of-state PAC (ID#:) Drakeford, James Contributor address; City; State; Zip Code 457 Malcolm X Blvd | | Amount of Contribution (\$) | \$50.00 |
| | | New York, NY 10037-3364 | | | |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instructions) | ons) | | |
| | Date 09/28/2022 | Full name of contributor out-of-state PAC (ID#:) Duke, Anne Contributor address; City; State; Zip Code 2606 Pegram Ave Austin, TX 78757-2345 | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instructions) | ons) | | |
| | Date 09/29/2022 | Full name of contributor out-of-state PAC (ID#:) Emrich, Aaron Contributor address; City; State; Zip Code 1008 Harwood Pl Austin, TX 78704-2613 | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instructions) | ons) | | |
| | | I . | | | |

| | MONEI | ARY POLITICAL CONTRIBUTION | IS | | SCHEDUL | E A1 |
|---|-----------------------------|--|------------------------------------|--|---|-------------|
| | The Instru | ction Guide explains how to complete this form | n. | 1 | Total pages Schedule A1: Sch: 5/22 Rpt: 8/62 | |
| 2 | FILER NAME | ooh | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Spearman, J | | | | 00090755 | |
| 4 | Date 09/02/2022 | | | | Amount of Contribution (\$) | \$450.00 |
| | | 6 Contributor address; City; State; Zip Code 222 West Ave Unit 1303 Austin, TX 78701-4657 | | | | |
| 8 | Principal occu Director | pation / Job title (See Instructions) 9 | Employer (See Instructions Self | 5) | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 07/18/2022 | Flory, Joel Contributor address; City; State; Zip Code 3473 Hamlin Rd | | | `, | \$50.00 |
| | | Lafayette, CA 94549-5020 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u>(</u> | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 07/10/2022 | Forrest, Hugh | | | | \$200.00 |
| | | Contributor address; City; State; Zip Code 3204 Highland Ter W | | | | |
| | | Austin, TX 78731-5323 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u>. </u> | | |
| | Event Planne | er | SXSW | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: | | | Amount of Contribution (\$) | |
| | 07/14/2022 | Francis, Scott Contributor address; City; State; Zip Code 5814 Westslope Dr | | | | \$400.00 |
| | | Austin, TX 78731-3633 | | | | |
| | Principal occu Executive | pation / Job title (See Instructions) | Employer (See Instructions BP3 | 5) | | |
| | Date | Full name of contributor ut-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 08/08/2022 | Frasier, Charles | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | 4625 Steed Dr | | | | |
| | | Austin, TX 78749-1160 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIONS | | SCHEDUL | E A1 |
|---|---------------------------|---|-----|---|-------------|
| | The Instru | ction Guide explains how to complete this form. | 1 | Total pages Schedule A1: Sch: 6/22 Rpt: 9/62 | |
| 2 | FILER NAME Spearman, J | oah | 3 | Filer ID (Ethics Commission 00090755 | n Filers) |
| 4 | Date 07/01/2022 | Full name of contributor out-of-state PAC (ID#:) Gonzales, Lainey Contributor address; City; State; Zip Code 1202 E 29th St | 7 | Amount of Contribution (\$) | \$20.00 |
| 8 | Principal occu | Austin, TX 78722-2308 Dation / Job title (See Instructions) 9 Employer (See Instructions) | ns) | | |
| | Date 08/31/2022 | Full name of contributor out-of-state PAC (ID#:) Gowda, Ihor Contributor address; City; State; Zip Code 1301 Alta Vista Ave Austin, TX 78704-2514 | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instruction | ns) | | |
| | Date 09/01/2022 | Full name of contributor | | Amount of Contribution (\$) | \$50.00 |
| | | Austin, TX 78751-4218 | | | |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instruction | ns) | | |
| | Date 09/27/2022 | Full name of contributor out-of-state PAC (ID#:) Hansen, Crystal Contributor address; City; State; Zip Code 210 Lavaca St Apt 1901 Austin, TX 78701-4582 | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instruction | ns) | | |
| | Date 09/29/2022 | Full name of contributor out-of-state PAC (ID#:) Herr, Reagan Contributor address; City; State; Zip Code 805 Tensley Trl Austin, TX 78748-6478 | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instruction | ns) | | |
| | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | NS | | SCHEDUL | E A1 |
|---|----------------------------|---|--|---|--|-------------|
| | The Instruc | ction Guide explains how to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 7/22 Rpt: 10/62 | |
| 2 | FILER NAME Spearman, J | oah | | 3 | Filer ID (Ethics Commission 00090755 | n Filers) |
| 4 | Date 07/13/2022 | Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$100.00 |
| 8 | Principal occu | Austin, TX 78724-7210 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> 5) | | |
| | Date 07/09/2022 | Full name of contributor out-of-state PAC (ID#: Hootman, Joe Contributor address; City; State; Zip Code 11919 Meadowfire Dr Austin, TX 78758-3318 |) | | Amount of Contribution (\$) | \$9.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 07/06/2022 | Full name of contributor out-of-state PAC (ID#: Hsu, Michael Contributor address; City; State; Zip Code 4011 Lewis Ln | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | Austin, TX 78756-3620 Dation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | | |
| | Date 07/13/2022 | Contributor address; City; State; Zip Code 4008 Avenue A | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | Austin, TX 78751-4513 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Date 07/24/2022 | Full name of contributor out-of-state PAC (ID#: Irwin, Mike Contributor address; City; State; Zip Code 1404 Vibar Cv Round Rock, TX 78681-2335 | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Director | pation / Job title (See Instructions) | Employer (See Instructions University Federal Cred | | nion | |
| | | • | | | | |

| | MONEI | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|-----------------------------|--|---|---------|--|-------------|
| | The Instruc | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 8/22 Rpt: 11/62 | |
| 2 | FILER NAME Spearman, J | oah | | 3 | Filer ID (Ethics Commission 00090755 | n Filers) |
| 4 | Date 07/07/2022 | 5 Full name of contributor out-of-state PAC (ID#:_ Jones, Charlie 6 Contributor address; City; State; Zip Code 4620 Lake View Dr |) | 7 | Amount of Contribution (\$) | \$400.00 |
| 8 | | Austin, TX 78731-4716 pation / Job title (See Instructions) | 9 Employer (See Instructions | j 5) | | |
| | Date 09/20/2022 | Full name of contributor out-of-state PAC (ID#:_ Jones, Martin Contributor address; City; State; Zip Code 10804 Seguin St Austin, TX 78754-4108 | FourLeaf Productions | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | oation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 09/07/2022 | Full name of contributor out-of-state PAC (ID#:_ Joseph, Peniel Contributor address; City; State; Zip Code 4906 Avenue F | | | Amount of Contribution (\$) | \$200.00 |
| | Dringing Loggy | Austin, TX 78751-2519 | Employer (Coo Instructions | <u></u> | | |
| | Professor | pation / Job title (See Instructions) | Employer (See Instructions University Of Texas | •) | | |
| | Date 09/27/2022 | Full name of contributor out-of-state PAC (ID#:_ Joseph, Peniel Contributor address; City; State; Zip Code 4906 Avenue F Austin, TX 78751-2519 | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu Professor | oation / Job title (See Instructions) | Employer (See Instructions University Of Texas | 5) | | |
| | Date 09/28/2022 | Full name of contributor out-of-state PAC (ID#:_KARPEL, Ryan Contributor address; City; State; Zip Code 700 Huntingdon PI Austin, TX 78745-5522 |) | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | oation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | | | | | | |

| | MONEI | ARY POLITICAL CO | NTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|--------------------------------|---|---|--|---|--|-------------|
| | The Instruc | ction Guide explains how to | complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 9/22 Rpt: 12/62 | |
| 2 | FILER NAME | aab | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Spearman, J | | | | | 00090755 | |
| 4 | Date 09/02/2022 | | | | 7 | Amount of Contribution (\$) | \$450.00 |
| | | 6 Contributor address; City; State; 555 E 5th St Apt 2812 Austin, TX 78701-4148 | Zip Code | | | | |
| 8 | Principal occu | oation / Job title (See Instructions) | 9 | Employer (See Instructions | () | | |
| | Retired seria | l entrepreneur and tech investor | | Kerr Tech Investments | | | |
| | Date 09/28/2022 | Full name of contributor Knutson, Kelley Contributor address; City; State; 310 E 35th St Austin, TX 78705-1613 | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$50.00 |
| | Driveries Lessus | | | Francis von (Coo Instructions | <u>, </u> | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 09/28/2022 | Full name of contributor Kreeger, Evangelina Contributor address; City; State; 2513 Spring Ln Austin, TX 78703-1742 | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$200.00 |
| | Princinal occur | pation / Job title (See Instructions) | | Employer (See Instructions | .) | | |
| | Self Employe | · · · · · · · · · · · · · · · · · · · | | Self Employed | ') | | |
| | | | - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | , h 19311 | | Amount of Contribution (ft) | |
| | Date 09/29/2022 | Full name of contributor Krumhansl, Ken Contributor address; City; State; 1405 Payne Ave Austin, TX 78757-2921 | out-of-state PAC (ID#: Zip Code | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Date 09/27/2022 | Full name of contributor Krupa, Nicholas Contributor address; City; State; 1711 Kenwood Ave Austin, TX 78704-3629 | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Head of Prod | pation / Job title (See Instructions) luct | | Employer (See Instructions Onramp Funds Inc | () | | |
| | | | <u>.</u> | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIONS | | SCHEDUL | E A1 |
|---|---------------------------|--|------|---|-----------|
| | The Instruc | ction Guide explains how to complete this form. | 1 | Total pages Schedule A1: Sch: 10/22 Rpt: 13/62 | |
| 2 | FILER NAME Spearman, J | oah | 3 | Filer ID (Ethics Commission 00090755 | n Filers) |
| 4 | Date 09/28/2022 | Full name of contributor out-of-state PAC (ID#:) Layton, Leana Contributor address; City; State; Zip Code 1701 Newfield Ln | 7 | Amount of Contribution (\$) | \$75.00 |
| 8 | Principal occu | Austin, TX 78703-3320 pation / Job title (See Instructions) 9 Employer (See Instructions) | ons) | | |
| | Date 07/24/2022 | Full name of contributor out-of-state PAC (ID#:) Libal, Bob Contributor address; City; State; Zip Code 904 Capitol Ct Austin, TX 78756-2703 | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instructions) | ons) | | |
| | Date 07/06/2022 | Full name of contributor out-of-state PAC (ID#:) Lipton, Scott Contributor address; City; State; Zip Code 2025 Cleese Dr | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | Austin, TX 78741-7095 cation / Job title (See Instructions) Employer (See Instructions) | ons) | | |
| | | | | | |
| | Date 09/07/2022 | Full name of contributor out-of-state PAC (ID#:) Madison, Amber Contributor address; City; State; Zip Code 3365 14th St Apt 9D Long Island City, NY 11106-4650 | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | coation / Job title (See Instructions) Employer (See Instructions) | ons) | | |
| | Date 09/27/2022 | Full name of contributor out-of-state PAC (ID#:) Martinez, Terry Contributor address; City; State; Zip Code 2211 W North Loop Blvd Apt 121 Austin, TX 78756-2314 | | Amount of Contribution (\$) | \$9.00 |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instructions) | ons) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | DNS | | SCHEDUL | E A1 |
|---|-----------------------------|--|---------------------------------|----------------|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 11/22 Rpt: 14/62 | |
| 2 | FILER NAME Spearman, J | oah | | 3 | Filer ID (Ethics Commission 00090755 | n Filers) |
| 4 | Date 09/27/2022 | 5 Full name of contributor out-of-state PAC (ID#:_ Mata, Jose I. 6 Contributor address; City; State; Zip Code 1408 W 10th St |) | 7 | Amount of Contribution (\$) | \$50.00 |
| | | Austin, TX 78703-4817 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 09/18/2022 | Full name of contributor out-of-state PAC (ID#:_McClain, Marjorie Contributor address; City; State; Zip Code 301 West Ave Apt 5603 Austin, TX 78701-4758 | | | Amount of Contribution (\$) | \$450.00 |
| | Principal occu Homemaker | pation / Job title (See Instructions) | Employer (See Instructions Self | 5) | | |
| | Date 09/18/2022 | Full name of contributor out-of-state PAC (ID#:_McClain, Mark Contributor address; City; State; Zip Code 301 West Ave Apt 5603 Austin, TX 78701-4758 | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 09/01/2022 | Contributor address; City; State; Zip Code 12 Lone Oak Trl | | | Amount of Contribution (\$) | \$400.00 |
| | Principal occu | Sunset Valley, TX 78745-2610 pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Executive | | Meta | | | |
| | Date 09/19/2022 | Full name of contributor out-of-state PAC (ID#:_ Merritt, Laura Contributor address; City; State; Zip Code 10806 Greymere Ct Austin, TX 78739-1506 | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u>L</u> s) | | |
| | | | <u> </u> | | | |

| | MONEI | ARY POLITICAL CO | NIRIBUTIO | NS | | SCHEDUL | E A1 |
|---|--------------------------------|---|--|---|-------------|---|-------------|
| | The Instru | ction Guide explains how to | o complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 12/22 Rpt: 15/62 | |
| 2 | FILER NAME Spearman, J | oah | | | 3 | Filer ID (Ethics Commission 00090755 | n Filers) |
| 4 | Date 09/10/2022 | 5 Full name of contributor Murphy, Ann 6 Contributor address; City; State 2494 S Hartford St | out-of-state PAC (ID#: e; Zip Code | | 7 | Amount of Contribution (\$) | \$50.00 |
| | | Salt Lake City, UT 84106-36 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instructions | 5) | | |
| | Date 09/29/2022 | Full name of contributor Murphy, Rob Contributor address; City; State 2494 S Hartford St Salt Lake City, UT 84106-36 | | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Date 09/29/2022 | Full name of contributor Needham, Hannah Contributor address; City; State 131 Royal Oak Ln | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$450.00 |
| | | Lakeway, TX 78734-4519 | | | | | |
| | Principal occu Photographe | pation / Job title (See Instructions) | | Employer (See Instructions Self Employed | | | |
| | Date 09/26/2022 | Full name of contributor Needham, John Contributor address; City; State 2204 Lake Austin Blvd Austin, TX 78703-4548 | out-of-state PAC (ID#:_ e; Zip Code |) | | Amount of Contribution (\$) | \$450.00 |
| | Principal occu Self-Employe | pation / Job title (See Instructions) ed | | Employer (See Instructions Development | 5) | | |
| | Date 09/26/2022 | Full name of contributor Needham, Jordan Contributor address; City; State 131 Royal Oak Ln Lakeway, TX 78734-4519 | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$450.00 |
| | Principal occu Owner | pation / Job title (See Instructions) | | Employer (See Instructions Self Employed | 5) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | N | IS | | SCHEDULI | E A1 |
|---|--------------------------------|---|-----|---|----------------|---|-------------|
| | The Instruc | ction Guide explains how to complete this f | orı | m. | 1 | Total pages Schedule A1: Sch: 13/22 Rpt: 16/62 | |
| 2 | FILER NAME Spearman, J | pah | | | 3 | Filer ID (Ethics Commission 00090755 | ı Filers) |
| 4 | Date 09/26/2022 | Full name of contributor | | | 7 | Amount of Contribution (\$) | \$450.00 |
| 8 | Principal occu Investor | Austin, TX 78703-3985 pation / Job title (See Instructions) | 9 | Employer (See Instructions Self Employed | <u> </u> ;) | | |
| | Date 09/26/2022 | Full name of contributor out-of-state PAC (ID#:_ Needham, Lucy Contributor address; City; State; Zip Code 2204 Lake Austin Blvd Austin, TX 78703-4548 | |) | | Amount of Contribution (\$) | \$450.00 |
| | Principal occup Not Employe | oation / Job title (See Instructions) d | | Employer (See Instructions Not Employed | s) | | |
| | Date 09/24/2022 | Full name of contributor out-of-state PAC (ID#:_ Nevill, Heather Contributor address; City; State; Zip Code 1701 Elmhurst Dr | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Engineering | Austin, TX 78741-2511 pation / Job title (See Instructions) | | Employer (See Instructions Google | <u> </u> ;) | | |
| | Date 07/05/2022 | Full name of contributor out-of-state PAC (ID#:_ODonnell, Heather Contributor address; City; State; Zip Code 5100 Single Shot Cir Austin, TX 78723-6140 | |) | | Amount of Contribution (\$) | \$20.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u>(</u> | | |
| | Date 09/20/2022 | Full name of contributor out-of-state PAC (ID#:_Older, Cory Contributor address; City; State; Zip Code 2505 Briargrove Dr Austin, TX 78704-2703 | |) | | Amount of Contribution (\$) | \$450.00 |
| | Principal occu Developer | oation / Job title (See Instructions) | | Employer (See Instructions Rccp | 5) | | |
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| | MONET | ARY POLITICAL CONTRIBUTIONS | | SCHEDUL | E A1 |
|---|-----------------------------|--|----------------|---|-------------|
| | The Instru | ction Guide explains how to complete this form. | 1 | Total pages Schedule A1: Sch: 14/22 Rpt: 17/62 | |
| 2 | FILER NAME Spearman, J | oah | 3 | Filer ID (Ethics Commission 00090755 | n Filers) |
| 4 | Date 09/20/2022 | 5 Full name of contributor out-of-state PAC (ID#:) Older, Danielle 6 Contributor address; City; State; Zip Code 2505 Briargrove Dr | 7 | Amount of Contribution (\$) | \$450.00 |
| 8 | Principal occu Developer | Austin, TX 78704-2703 pation / Job title (See Instructions) 9 Employer (See Instructions Rccp | <u> </u> ;) | | |
| | Date 09/27/2022 | Full name of contributor out-of-state PAC (ID#:) PERLMAN, BRANDON Contributor address; City; State; Zip Code 8937 Dorrington Ave West Hollywood, CA 90048-1710 | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instructions | 5) | | |
| | Date 09/27/2022 | Full name of contributor out-of-state PAC (ID#:) Pariseau, Jillian Contributor address; City; State; Zip Code 1712 Payne Ave | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Operations | Austin, TX 78757-2926 pation / Job title (See Instructions) Employer (See Instructions Apple | <u> </u> 5) | | |
| | Date 09/28/2022 | Full name of contributor out-of-state PAC (ID#:) Parvez, Asma Contributor address; City; State; Zip Code 12512 Red Sparrow St Austin, TX 78729-3621 | | Amount of Contribution (\$) | \$5.00 |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instructions) | 5) | | |
| | Date 09/28/2022 | Full name of contributor out-of-state PAC (ID#:) Perot, Sarah Catherine Contributor address; City; State; Zip Code 2705 B Bonnie Rd Austin, TX 78703-2801 | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instructions) | 5) | | |
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| | MONEI | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|------------------------------|--|--|----------------|---|-------------|
| | The Instruc | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 15/22 Rpt: 18/62 | |
| 2 | FILER NAME Spearman, J | oah | | 3 | Filer ID (Ethics Commission 00090755 | n Filers) |
| 4 | Date 09/20/2022 | Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$450.00 |
| 8 | Principal occu Consultant | Austin, TX 78757-2341 pation / Job title (See Instructions) | Employer (See Instructions WE Communications | s) | | |
| | Date 09/27/2022 | Full name of contributor out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$450.00 |
| | Principal occu Tech | pation / Job title (See Instructions) | Employer (See Instructions DoorDash | s) | | |
| | Date 09/28/2022 | Full name of contributor out-of-state PAC (ID#:_Quesada, Adrian and Celeste Contributor address; City; State; Zip Code 502 Rhonda Ct Austin, TX 78745-2411 |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | | |
| | Date 08/27/2022 | Full name of contributor out-of-state PAC (ID#:_ Reese, Natalie Contributor address; City; State; Zip Code 1200 Baylor St Apt 401 Austin, TX 78703-4172 | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Date 07/01/2022 | Full name of contributor out-of-state PAC (ID#: Reeves, Robert Contributor address; City; State; Zip Code 1000 Alta Vista Ave Austin, TX 78704-1337 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
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| | MONET | ARY POLITICAL CONTRIBUTIONS | SCHEDULE A1 |
|---|-----------------------------|---|---|
| | The Instruc | ction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 16/22 Rpt: 19/62 |
| 2 | FILER NAME Spearman, J | oah | 3 Filer ID (Ethics Commission Filers) 00090755 |
| 4 | Date 09/27/2022 | Full name of contributor out-of-state PAC (ID#: | 7 Amount of Contribution (\$) \$50.00 |
| 8 | Principal occu | Austin, TX 78704-4915 pation / Job title (See Instructions) 9 Employe | er (See Instructions) |
| | Date 07/29/2022 | Full name of contributor out-of-state PAC (ID#: |) Amount of Contribution (\$) \$400.00 |
| | Principal occu Architect | pation / Job title (See Instructions) Employe Self Em | er (See Instructions) |
| | Date 09/20/2022 | Full name of contributor out-of-state PAC (ID#: | Amount of Contribution (\$) \$450.00 |
| | Principal occu Artist | | r (See Instructions) uployed |
| | Date 07/18/2022 | Full name of contributor out-of-state PAC (ID#: | Amount of Contribution (\$) \$25.00 |
| | Principal occu | pation / Job title (See Instructions) Employe | er (See Instructions) |
| | Date 08/31/2022 | Full name of contributor out-of-state PAC (ID#: | Amount of Contribution (\$) \$50.00 |
| | Principal occu | pation / Job title (See Instructions) Employe | er (See Instructions) |
| | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|---------------------------|---|-------------------------------------|----------------|---|-------------|
| | The Instruc | etion Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 17/22 Rpt: 20/62 | |
| 2 | FILER NAME Spearman, J | pah | | 3 | Filer ID (Ethics Commission 00090755 | n Filers) |
| 4 | Date 09/01/2022 | Full name of contributor out-of-state PAC (ID#:_Sepulveda, Eugene Contributor address; City; State; Zip Code 3114 Wheeler St | | 7 | Amount of Contribution (\$) | \$50.00 |
| 8 | Principal occu | Austin, TX 78705-2816 pation / Job title (See Instructions) | 9 Employer (See Instructions | <u> </u> ;) | | |
| | Date 09/28/2022 | Full name of contributor | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/31/2022 | Full name of contributor out-of-state PAC (ID#:_ Sigmon, James Contributor address; City; State; Zip Code 1106 Claire Ave |) | | Amount of Contribution (\$) | \$50.00 |
| | | Austin, TX 78703-2502 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 08/31/2022 | Full name of contributor out-of-state PAC (ID#:_Sigmon, Traci H. Contributor address; City; State; Zip Code 1106 Claire Ave Austin, TX 78703-2502 | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 09/29/2022 | Full name of contributor out-of-state PAC (ID#:_Spearman, Joah Contributor address; City; State; Zip Code 1503 W 10th St Austin, TX 78703-4818 |) | | Amount of Contribution (\$) | \$300.00 |
| | Principal occu CEO | oation / Job title (See Instructions) | Employer (See Instructions Localeur | 5) | | |
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| | MONEI | ARY POLITICAL CON | TRIBUTION | S | | SCHEDUL | E A1 |
|---|-----------------------|---|----------------------|--------------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to co | omplete this form | n. | 1 | Total pages Schedule A1: Sch: 18/22 Rpt: 21/62 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Spearman, J | | | | | 00090755 | |
| 4 | Date 09/29/2022 | 5 Full name of contributor our our Spearman, Joah | t-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$13.30 |
| | | 6 Contributor address; City; State; Zip 1503 W 10th St | o Code | | | | |
| | | Austin, TX 78703-4818 | | | | | |
| 8 | Principal occu CEO | pation / Job title (See Instructions) | 9 | Employer (See Instructions) Localeur |) | | |
| | Date | Full name of contributor out | t-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 09/24/2022 | Speer, Philip | | | | | \$150.00 |
| | | Contributor address; City; State; Zip | o Code | | | | |
| | | 5018 Westfield Dr | | | | | |
| | | Austin, TX 78731-5029 | | | | | |
| | Principal occu | oation / Job title (See Instructions) | | Employer (See Instructions) |) | | |
| | Date | Full name of contributor out | t-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 09/28/2022 | Spies, Brad | | | | | \$50.00 |
| | | Contributor address; City; State; Zip | o Code | | | | |
| | | 3108 Fontana Dr | | | | | |
| | | Austin, TX 78704-6332 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions) |) | | |
| | | | | | | | |
| | Date | Full name of contributor out | t-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 09/26/2022 | Stefanakis, Nikias | | | | | \$50.00 |
| | | Contributor address; City; State; Zip | o Code | | | | |
| | | 3365 14th St | | | | | |
| | | Astoria, NY 11106-4648 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions) |) | | |
| | | | | | | | |
| | Date | — | t-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 09/19/2022 | Stege, Suzy and Tom | | | | | \$100.00 |
| | | Contributor address; City; State; Zip | o Code | | | | |
| | | 1623 W 10th St | | | | | |
| | | Austin, TX 78703-3905 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions) |) | | |
| | | | | | | | |
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| | MONET | ARY POLITICAL CONTRIBUTIO | ONS | | SCHEDUL | E A1 |
|---|--------------------------------|---|---|----------------|---|-------------|
| | The Instruc | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 19/22 Rpt: 22/62 | |
| 2 | FILER NAME Spearman, J | oah | | 3 | Filer ID (Ethics Commission 00090755 | n Filers) |
| 4 | Date 09/20/2022 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$50.00 |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 08/22/2022 | Full name of contributor out-of-state PAC (ID#:_Straus, Stephen Contributor address; City; State; Zip Code 3700 Bridle Path Austin, TX 78703-2005 | | | Amount of Contribution (\$) | \$400.00 |
| | Principal occu Professional | pation / Job title (See Instructions) | Employer (See Instructions Kung Fu Solutions Inc. | 5) | | |
| | Date 08/23/2022 | Full name of contributor out-of-state PAC (ID#:_ Sullivan, David Contributor address; City; State; Zip Code 1710 Waterston Ave Austin, TX 78703-3937 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> 5) | | |
| | Date 08/19/2022 | Full name of contributor out-of-state PAC (ID#:_ Sullivan, W. Barrett Contributor address; City; State; Zip Code 8112 Hubble Walk Austin, TX 78744-4687 | | | Amount of Contribution (\$) | \$40.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 09/26/2022 | Full name of contributor out-of-state PAC (ID#:_ Swan, Laurie Contributor address; City; State; Zip Code 212 Lavaca St Ste 300 Austin, TX 78701-3955 |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | | ' | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIONS | | SCHEDUL | E A1 |
|---|---------------------------|---|---|---|-------------|
| | The Instru | ction Guide explains how to complete this form. | 1 | Total pages Schedule A1: Sch: 20/22 Rpt: 23/62 | |
| 2 | FILER NAME Spearman, J | | 3 | Filer ID (Ethics Commission 00090755 | n Filers) |
| 4 | Date 09/13/2022 | Swantner, Albert 6 Contributor address; City; State; Zip Code 6500 Cannonleague Dr | 7 | Amount of Contribution (\$) | \$350.00 |
| 8 | Principal occu | Austin, TX 78745-4918 Dation / Job title (See Instructions) 9 Employer (See Instructions) Betterleave | 1 | | |
| | Date 09/01/2022 | Full name of contributor out-of-state PAC (ID#:) Trumbull, Matthew Contributor address; City; State; Zip Code 610 Highland Ave Falls Church, VA 22046-2521 | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instructions) | | | |
| | Date 08/17/2022 | Full name of contributor out-of-state PAC (ID#:) Wallace, Brita Contributor address; City; State; Zip Code 1603 Bouldin Ave | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | Austin, TX 78704-3418 pation / Job title (See Instructions) Employer (See Instructions) | 1 | | |
| | Date 08/31/2022 | Full name of contributor out-of-state PAC (ID#:) Wang, Evana Contributor address; City; State; Zip Code 4600 Mueller Blvd Apt 1064 Austin, TX 78723-3195 | | Amount of Contribution (\$) | \$20.00 |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instructions) | 1 | | |
| | Date 09/29/2022 | Full name of contributor out-of-state PAC (ID#:) Wang, Evana Contributor address; City; State; Zip Code 4600 Mueller Blvd Apt 1064 Austin, TX 78723-3195 | | Amount of Contribution (\$) | \$20.00 |
| | Principal occu | pation / Job title (See Instructions) Employer (See Instructions) | | | |
| | | 1 | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|---------------------------|---|------------------------------|---|---|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 21/22 Rpt: 24/62 | |
| 2 | FILER NAME Spearman, J | loah | | 3 | Filer ID (Ethics Commission 00090755 | n Filers) |
| 4 | Date 09/27/2022 | 5 Full name of contributor out-of-state PAC (ID#:_Wigginton, William 6 Contributor address; City; State; Zip Code 1711 Kenwood Ave Austin, TX 78704-3629 |) | 7 | Amount of Contribution (\$) | \$50.00 |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 09/26/2022 | Full name of contributor out-of-state PAC (ID#:_Wilson, Adam Contributor address; City; State; Zip Code 4315 Avenue G Austin, TX 78751-3817 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/29/2022 | Full name of contributor out-of-state PAC (ID#:_ Wise, Steven Contributor address; City; State; Zip Code 402 W North Loop Blvd # A Austin, TX 78751-1924 | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/21/2022 | Full name of contributor out-of-state PAC (ID#:_ Wommack, Kevin Contributor address; City; State; Zip Code 1506 W 13th St Apt 5 Austin, TX 78703-4062 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 09/04/2022 | Full name of contributor out-of-state PAC (ID#:_ Wynn, Bob Contributor address; City; State; Zip Code 1209 Castle Hill St Austin, TX 78703-4125 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | SCHEDULE | A1 |
|---|--|----|---|-----------|
| | The Instruction Guide explains how to complete this form. | 1 | Total pages Schedule A1: Sch: 22/22 Rpt: 25/62 | |
| 2 | FILER NAME Spearman, Joah | 1 | Filer ID (Ethics Commission Fi 00090755 | lers) |
| 4 | Date 5 Full name of contributor out-of-state PAC (ID#:) de la Vara, Leticia 6 Contributor address; City; State; Zip Code 2122 W Adams St Phoenix, AZ 85009-5237 | 7 | Amount of Contribution (\$) \$ | \$200.00 |
| 8 | Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Chief of Staff TNTP | s) | | |
| | | | | |

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 c | ompl | ete this form. |
|---|--|---|----------|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 1/34 Rpt: 26/62 | Spearman, Joah | | 00090755 |
| 4 | Date | 5 Payee name | | • |
| | 08/17/2022 | AT&T | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip C | ode | |
| | \$232.76 | 208 S Akard St Ste 2954 | | |
| | | Dallac TV 7F202 | | |
| Ļ | PURPOSE | Dallas, TX 75202 | 10-1 | |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (a) | Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Since Svericuarrental Expense | | Check if Austin, TX, officeholder living expense |
| | | | | Telephone service |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office so | ught | Office held |
| | expenditure to benefit C/Ol | | ugni | Office field |
| ⊨ | Date | Payee name | | |
| | 09/28/2022 | AT&T | | |
| H | Amount (\$) | Payee address; City; State; Zip C | ode | |
| | \$111.36 | 208 S Akard St Ste 2954 | | |
| | | | | |
| | | Dallas, TX 75202 | | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) | (b) | Description |
| l | EXPENDITURE | Office Overhead/Rental Expense | | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | | | Telephone service |
| | | | | |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office so | ught | Office held |
| L | experientare to benefit 6/61 | | | |
| | Date | Payee name | | |
| L | 08/17/2022 | AT&T | | |
| | Amount (\$) \$384.26 | Payee address; City; State; Zip C 208 S Akard St Ste 2954 | oue | |
| | Ψ004.20 | 200 07 11011 01 010 2004 | | |
| | | Dallas, TX 75202 | | |
| ┝ | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) | Description |
| l | OF EXPENDITURE | Office Overhead/Rental Expense | | Check if travel outside of Texas. Complete Schedule T. |
| l | LXI LINDITORE | | | Check if Austin, TX, officeholder living expense Telephone service |
| | | | | Total Principle Scriptor |
| | Complete ONLY if direct | Candidate/Officeholder name Office so | <u> </u> | Office held |
| | expenditure to benefit C/O | | | |
| | | | | |
| | | | | |
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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

| | Candidate/Officeholder/Politica Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 2/34 Rpt: 27/62 | Spearman, Joah 00090755 |
| 4 | Date | 5 Payee name |
| | 08/22/2022 | Austin AFL-CIO |
| 6 | Amount (\$) \$521.37 | 7 Payee address; City; State; Zip Code PO Box 87 |
| | | Austin, TX 78767 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Print advertisement |
| | | |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 08/31/2022 | Big Brother Big Sisters |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$250.00 | 4800 Manor Rd |
| | | |
| | | Austin, TX 78723 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Contributions/Donations Made By |
| | - | Candidate/Officeholder/Political Committee |
| | | Bonation |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 08/02/2022 | CFC Consulting |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$250.00 | PO Box 301074 |
| | | |
| | | Austin, TX 78703 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | LAI LINDITORE | Check if Austin, TX, officeholder living expense |
| | | Compliance consulting |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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 co | omplete th | nis form. | | |
|--|--|------------|--|---------------------|----------------------------|
| 1 Total pages Schedule F1: | 2 FILER NAME | | 3 | Filer ID | (Ethics Commission Filers) |
| Sch: 3/34 Rpt: 28/62 | Spearman, Joah | | | 00090755 | |
| 4 Date | 5 Payee name | | • | | |
| 09/12/2022 | CFC Consulting | | | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Co | ode | | | |
| \$250.00 | PO Box 301074 | | | | |
| | | | | | |
| | Austin, TX 78703 | | | | |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Des | scription | | |
| OF EXPENDITURE | Consulting Expense | | Check if travel outsid | | |
| LXI LINDITORE | | . — | Check if Austin, TX, | | gexpense |
| | | _ C0 | mpliance cons | suiting | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sou | ught | | Office he | nid |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/O | | ugnt | | Office fie | eiu |
| Data | | | | | |
| Date | Payee name | | | | |
| 08/02/2022 | Cates Legal Group | | | | |
| Amount (\$) | Payee address; City; State; Zip Co | ode | | | |
| \$500.00 | 5910 Clementine Ln | | | | |
| | | | | | |
| | Austin, TX 78744 | | | | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) | · — | scription | | |
| EXPENDITURE | Legal Services | | Check if travel outsid Check if Austin, TX, | | |
| | | | gal consulting | | , |
| | | | | | |
| Complete ONLY if direct | Candidate/Officeholder name Office sou | ught | | Office he | eld |
| expenditure to benefit C/O | Н | | | | |
| Date | Payee name | | | | |
| 09/12/2022 | Cates Legal Group | | | | |
| Amount (\$) | Payee address; City; State; Zip Co | ode | | | |
| \$500.00 | 5910 Clementine Ln | | | | |
| | | | | | |
| | Austin, TX 78744 | | | | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (h) Des | scription | | |
| OF | Legal Services | | Check if travel outsid | e of Texas. Com | plete Schedule T. |
| EXPENDITURE | | | Check if Austin, TX, | officeholder living | g expense |
| | | Leç | gal consulting | | |
| | | | | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sou | ught | | Office he | eld |
| experience to benefit 6/0 | | | | | |
| | | | | | |
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SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|---|--|--|
| 1 | Total pages Cabadula F1: | 2 Files ID (Ethios Commission Files) |
| 1 | Total pages Schedule F1: Sch: 4/34 Rpt: 29/62 | 2 FILER NAME Spearman, Joah Spearman, Joah Spearman, Joah Spearman, Joah |
| 4 | Date | 5 Payee name |
| | 09/23/2022 | Cates Legal Group |
| 6 | Amount (\$) \$500.00 | 7 Payee address; City; State; Zip Code 5910 Clementine Ln Austin, TX 78744 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF | Legal Services Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense Legal consulting |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 08/08/2022 | Christopher, Ndubuizu |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$200.00 | 4400A Vaughn St |
| | | Austin, TX 78723 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor |
| | | Check if Austin, TX, officeholder living expense |
| | | Campaign contract services |
| | | |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 09/01/2022 | Christopher, Ndubuizu |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$175.00 | 4400A Vaughn St |
| | | Austin, TX 78723 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor |
| | _/\\ _!\\\ | Check if Austin, TX, officeholder living expense |
| | | Campaign contract services |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | | |
| | | |
| | | |

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services 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 comp | plete | this form. |
|---|---|--|--------------|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| l | Sch: 5/34 Rpt: 30/62 | Spearman, Joah | | 00090755 |
| 4 | Date | 5 Payee name | | - |
| l | 09/22/2022 | DJ, Shani | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | e | |
| l | \$300.00 | 4361 S. Congress Ave, Suite 101 | | |
| l | | | | |
| | | Austin, TX 78701 | | |
| 8 | PURPOSE | | b) Da | escription |
| | OF | Event Expense | ~, D | Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | | | Check if Austin, TX, officeholder living expense |
| | | | pe | erformance at campaign event |
| | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sough | ht | Office held |
| L | experientare to benefit G/OI | 1 | | |
| | Date | Payee name | | |
| l | 08/22/2022 | DJ, Shani | | |
| Г | Amount (\$) | Payee address; City; State; Zip Code | е | |
| l | \$500.00 | 310 Willie Nelson Blvd | | |
| | | | | |
| | | Austin, TX 78701 | | |
| Г | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) | b) De | escription |
| | OF EXPENDITURE | Event Expense | | Check if travel outside of Texas. Complete Schedule T. |
| | LXI LINDITORE | | L | Check if Austin, TX, officeholder living expense |
| | | | þ€ | erformance at campaign event |
| ┝ | Complete ONLY if direct | Candidate/Officeholder name Office sough | ht | Office held |
| | expenditure to benefit C/OI | | 111 | Office field |
| ⊨ | Data | | | |
| l | Date 07/19/2022 | Payee name DJ Kay, Cali | | |
| | | | | |
| l | Amount (\$) | Payee address; City; State; Zip Code | е | |
| l | \$400.00 | 807 E. 4th Street | | |
| | | Austin TV 70700 | | |
| L | | Austin, TX 78702 | | |
| | PURPOSE OF | , | b) De | escription |
| l | EXPENDITURE | Event Expense | ⊨ | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| l | | | pe | erformance at campaign event |
| | | | • | |
| H | Complete ONLY if direct | Candidate/Officeholder name Office sough | ht | Office held |
| | expenditure to benefit C/OI | 1 | | |
| H | | | | |
| | | | | |
| ĺ | | | | |

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

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

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|---|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 6/34 Rpt: 31/62 | Spearman, Joah 00090755 |
| 4 | Date | 5 Payee name |
| | 09/08/2022 | Delta Airlines |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$393.20 | 1020 Cargo Service Rd |
| | | |
| | | Atlanta, GA 30337 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel Out of District X Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | airfare to Atlanta for fundraising trip |
| L | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |
| | Date | Payee name |
| | 08/15/2022 | Enterprise Rent-A-Car |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$143.31 | 600 Corporate Park Dr |
| | | |
| | | Saint Louis, MO 63105 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel Out of District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense rental car |
| | | - Sinda Gai |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | 1 |
| | Date | Payee name |
| | 08/19/2022 | Enterprise Rent-A-Car |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$454.95 | 600 Corporate Park Dr |
| | | |
| | | Saint Louis, MO 63105 |
| | PURPOSE | |
| | OF | (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | rental car |
| | | |
| | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought Office held |
| | experience to belieff C/Of | • |
| | | |
| | | |

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | t listed above) |
|----------|--|---|-------------------|
| 1 | Total pages Schedule F1: | · · · · · · · · · · · · · · · · · · · | ommission Filers) |
| 1 | Sch: 7/34 Rpt: 32/62 | | ommission File(s) |
| Ļ | | | |
| 4 | Date | 5 Payee name | |
| | 08/01/2022 | Ethan, Smith | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | |
| | \$522.75 | 3002 Breeze Ter Unit B | |
| | | | |
| | | Austin, TX 78722 | |
| 8 | PURPOSE | | |
| o | OF | (a) Category (See Categories listed at the top of this schedule) (b) Description Category (See Categories listed at the top of this schedule) | ulo T |
| | EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedu | are i. |
| | | Campaign contract services | |
| | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| ľ | expenditure to benefit C/O | | |
| <u> </u> | | <u> </u> | |
| | Date | Payee name | |
| | 09/02/2022 | Ethan, Smith | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$762.50 | 3002 Breeze Ter Unit B | |
| | | | |
| | | Austin, TX 78722 | |
| \vdash | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedules | ule T. |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense | |
| | | Campaign contract services | |
| | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| | expenditure to benefit C/OI | DH | |
| H | Date | Payee name | |
| | 07/19/2022 | Ever, Calderon | |
| _ | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$300.00 | 1110 Twisted Crk | |
| | | | |
| L | | Kyle, TX 78640 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Consulting Expense | ıle T. |
| | LAI LIIDITOILE | Check if Austin, TX, officeholder living expense | |
| | | Photos | |
| | | | |
| | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought Office held | |
| | experiorale to belieff C/Of | | |
| | | | |
| | | | |
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SCHEDULE F1

Advertising Expense Event E:
Accounting/Banking Fees
Consulting Expense Food/Be
Contributions/ Donations Made By - Gitt/Awa

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

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

| | Contributing Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|---|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 8/34 Rpt: 33/62 | Spearman, Joah 00090755 |
| 4 | Date | 5 Payee name |
| | 09/21/2022 | Ever, Calderon |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$150.00 | 1110 Twisted Crk |
| | | |
| | | Kyle, TX 78640 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Photos |
| | | Filotos |
| _ | Complete ONLY if direct | Condidate Office helder name Office equality Office held |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 09/26/2022 | Ever, Calderon |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$150.00 | 1110 Twisted Crk |
| | | |
| | | Kyle, TX 78640 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Photos |
| | | Thotas |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | Date | Davido namo |
| | 09/26/2022 | Payee name Ever, Calderon |
| | | |
| | Amount (\$) \$150.00 | Payee address; City; State; Zip Code 1110 Twisted Crk |
| | \$150.00 | TITO TWISTED CIK |
| | | Kyle, TX 78640 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | Photos |
| | | |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | CAPETIGITATE TO DETICITE C/OF | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|----------|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 9/34 Rpt: 34/62 | Spearman, Joah 00090755 |
| 4 | Date | 5 Payee name |
| | 07/25/2022 | FedEx Office |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$213.69 | 9222 Burnet Rd |
| | | |
| | | Austin, TX 78758-5290 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | printing |
| | | pintang |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 | expenditure to benefit C/O | |
| \vdash | Data | |
| | Date | Payee name |
| | 07/25/2022 | FedEx Office |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$300.00 | 9222 Burnet Rd |
| | | |
| | | Austin, TX 78758-5290 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | printing |
| | | pintang |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | Data | Davies same |
| | Date | Payee name |
| | 07/25/2022 | FedEx Office |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$463.84 | 9222 Burnet Rd |
| | | |
| | | Austin, TX 78758-5290 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Printing Expense |
| | EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | | printing |
| | 0 1. 0 | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | Oriana.o to borioni O/Oi | |
| | | |
| | | |
| | | |

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 Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. | | | | OTHER (enter a category not listed above) | | | | | | |
|-------------------------|---|----------|---|-------------|-----------------|------------------|---|--------|---------------------------------|--------|--------------|---------|----------------------------|
| _ | | _ | | | ruction Gu | iue expiairis | s now to co | ilibid | ete tilis ioriii. | _ | | | |
| 1 | Total pages Schedule F1: | 2 | | | | | | | | 3 | Filer ID | | (Ethics Commission Filers) |
| | Sch: 10/34 Rpt: 35/62 | | Spearman, | Joah | | | | | | | 000907 | 55 | |
| 4 | Date | 5 | Payee name | | | | | | | | | | |
| | 07/26/2022 | | FedEx Office | е | | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee addres | ss; C | City; | State | e; Zip Co | ode | | | | | |
| | \$330.16 | | 9222 Burnet | | | | · | | | | | | |
| | | | | | | | | | | | | | |
| | | | Augtin TV 7 | 07E0 E | 200 | | | | | | | | |
| | | L | Austin, TX 7 | | | | | | | | | | |
| 8 | PURPOSE OF | (a) | Category (Se | | es listed at th | e top of this so | chedule) | (b) | Description | | | | |
| | EXPENDITURE | | Printing Exp | ense | | | | | Check if travel Check if Austin | | | | plete Schedule T. |
| | | | | | | | | | printing | ι, ιλ, | omeendaei | iiviiig | гехрепас |
| | | | | | | | | | printing | | | | |
| Ļ | Commission ONII V if direct | <u> </u> | Condidate/Offic | | | | Office | | | | Offic | | al al |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | | Candidate/Offic | cenolaer | name | | Office sou | ignt | | | Опіс | e he | eia |
| | · | | | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | | |
| | 08/04/2022 | | FedEx Office | е | | | | | | | | | |
| | Amount (\$) | | Payee addres | ss; C | City; | State | e; Zip Co | ode | | | | | |
| | \$444.63 | | 9222 Burnet | : Rd | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | Austin, TX 7 | 8758-5 | 290 | | | | | | | | |
| | PURPOSE | (2) | | | | | | (h) | Description | | | | |
| | OF | (a) | Category (Se | | es listed at th | e top of this so | chedule) | (0) | Description Check if travel | outsi | de of Texas | Comi | plete Schedule T. |
| | EXPENDITURE | | Printing Exp | ense | | | | | Check if Austin | | | | |
| | | | | | | | | | printing | | | | |
| | | | | | | | | | | | | | |
| Complete ONLY if direct | | | Candidate/Offic | ceholder | name | | Office sou | ıght | | | Offic | e he | eld |
| | expenditure to benefit C/OI | Н | | | | | | - | | | | | |
| - | Date | Π | Davisa nama | | | | | | | | | | |
| | 08/12/2022 | | Payee name FedEx Office | 0 | | | | | | | | | |
| | | | | | _ | | | | | | | | |
| | Amount (\$) | | Payee addres | • | City; | State | e; Zip Co | ode | | | | | |
| | \$457.90 | | 9222 Burnet | Rd | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | Austin, TX 7 | 8758-5 | 290 | | | | | | | | |
| | PURPOSE | (a) | Category (Se | e Categorie | es listed at th | e top of this so | :hedule) | (b) | Description | | | | |
| | OF EXPENDITURE | | Printing Exp | | | | , | | Check if travel | outsi | de of Texas | Com | plete Schedule T. |
| | EXPENDITURE | | | | | | | | Check if Austin | ı, TX, | officeholder | living | expense |
| | | | | | | | | | printing | | | | |
| | | | | | | | | | | | | | |
| | Complete ONLY if direct | | Candidate/Offic | ceholder | name | | Office sou | ıght | | | Offic | e he | eld |
| | expenditure to benefit C/OI | H | | | | | | | | | | | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense 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 (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 complete this form. |
|---|-----------------------------|---|
| 1 | Total pages Schedule F1: | · · · · · · · · · · · · · · · · · · · |
| | Sch: 11/34 Rpt: 36/62 | Spearman, Joah 00090755 |
| 4 | Date | 5 Payee name |
| | 08/08/2022 | Go Daddy |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$30.16 | 14455 N Hayden Rd Ste 219 |
| | | |
| | | Scottsdale, AZ 85260 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Website hosting |
| | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| _ | Date | Payee name |
| | 08/23/2022 | Go Daddy |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$60.51 | 14455 N Hayden Rd Ste 219 |
| | 400.02 | - 1 1 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | | Scottsdale, AZ 85260 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Website hosting |
| | | g and a set of |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OF | 4 |
| | Date | Payee name |
| | 08/31/2022 | Go Daddy |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$99.99 | 14455 N Hayden Rd Ste 219 |
| | | |
| | | Scottsdale, AZ 85260 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. |
| | _ | Check if Austin, TX, officeholder living expense Website hosting |
| | | Website Hosting |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | · · · · · · · · · · · · · · · · · · · |
| | | |
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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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

| | Credit Card Payment | The Instruction Guide explains how to co | mple | ete this form. |
|---|--|--|------|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 12/34 Rpt: 37/62 | Spearman, Joah | | 00090755 |
| 4 | Date | 5 Payee name | | |
| | 08/02/2022 | Jacob, Cavaliere | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Co | de | |
| | \$3,725.00 | 2400 Manor Rd # 3370 | | |
| | | | | |
| | | Austin, TX 78722 | | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) | Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor | | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | | | Campaign salary |
| | | | | campaign calary |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sou | aht | Office held |
| J | expenditure to benefit C/O | | giit | Office field |
| _ | Data | Para area | | |
| | Date 07/05/2022 | Payee name | | |
| | | Jacob, Cavaliere | | |
| | Amount (\$) | Payee address; City; State; Zip Co | de | |
| | \$2,225.00 | 2400 Manor Rd # 3370 | | |
| | | | | |
| | | Austin, TX 78722 | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) | Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor | | Check if travel outside of Texas. Complete Schedule T. |
| | — /4: ———— | | | Check if Austin, TX, officeholder living expense Campaign salary |
| | | | | Campaign salary |
| | Complete ONLY if direct | Candidate/Officeholder name Office sou | aht | Office held |
| | expenditure to benefit C/O | | giit | Office field |
| | | | | |
| | Date | Payee name | | |
| | 09/02/2022 | Jacob, Cavaliere | | |
| | Amount (\$) | Payee address; City; State; Zip Co | de | |
| | \$4,375.00 | 2400 Manor Rd # 3370 | | |
| | | | | |
| | | Austin, TX 78722 | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) | Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor | | Check if travel outside of Texas. Complete Schedule T. |
| | | | | Check if Austin, TX, officeholder living expense |
| | | | | Campaign salary |
| | 0 1 0 0 1 1 1 1 | | | 000 |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office soul | gnt | Office held |
| | | | | |
| | | | | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made B
Candidate/Officeholder/Politics

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| • | Sch: 13/34 Rpt: 38/62 | Spearman, Joah O0090755 |
| 4 | Date | 5 Payee name |
| | 07/05/2022 | Jessica, Rodriguez Robertson |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$2,195.00 | 10403 Golden Meadow Dr Unit A |
| | | |
| | | Austin, TX 78758 |
| 8 | PURPOSE | |
| ľ | OF | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Campaign salary |
| | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/Oi | |
| | Date | Payee name |
| | 08/02/2022 | Jessica, Rodriguez Robertson |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$1,760.00 | 10403 Golden Meadow Dr Unit A |
| | | |
| | | Austin, TX 78758 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| | | Compaign colon |
| | | Campaign salary |
| _ | Opening the ONLY if allowed | On did to 10 ff as hald a grant Off as south |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |
| | Date | Payee name |
| | 09/28/2022 | Mailchimp |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$490.36 | 675 Ponce De Leon Ave NE Ste 5000 |
| | | |
| | | Atlanta, GA 30308 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Office Overhead/Rental Expense |
| | ZA ZIIDII GIAZ | Check if Austin, TX, officeholder living expense |
| | | Email distribution software |
| | | |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | experience to beliefft C/OI | • |
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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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

| | Credit Card Payment | The Instruction Guide explains how to complete this form. | | | | | |
|---|---|---|---|--|--|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | _ | | | | |
| | Sch: 14/34 Rpt: 39/62 | Spearman, Joah 00090755 | | | | | |
| 4 | Date | 5 Payee name | _ | | | | |
| | 07/05/2022 | NGP VAN | | | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | - | | | | |
| | \$159.90 | 655 15th St NW Ste 650 | | | | | |
| | | | | | | | |
| | | Washington, DC 20005 | | | | | |
| 8 | PURPOSE | | _ | | | | |
| ľ | OF | (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. | | | | | |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense | | | | | |
| | | Database usage fees | | | | | |
| | | | | | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | | | | | |
| | expenditure to benefit C/Ol | 1 | | | | | |
| | Date | Payee name | _ | | | | |
| | 08/04/2022 | NGP VAN | | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | _ | | | | |
| | \$159.90 | 655 15th St NW Ste 650 | | | | | |
| | | | | | | | |
| | | Washington, DC 20005 | | | | | |
| - | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | _ | | | | |
| | OF | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. | | | | | |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense | | | | | |
| | | Database usage fees | | | | | |
| | | | _ | | | | |
| | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held | | | | | |
| | | | _ | | | | |
| | Date | Payee name | | | | | |
| | 09/02/2022 | NGP VAN | | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | | | |
| | \$159.90 | 655 15th St NW Ste 650 | | | | | |
| | | | | | | | |
| | | Washington, DC 20005 | | | | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | |
| | OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. | | | | | |
| | | Check if Austin, TX, officeholder living expense | | | | | |
| | | Database usage fees | | | | | |
| L | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | _ | | | | |
| | Complete ONLY if direct expenditure to benefit C/Ol | | | | | | |
| | | | | | | | |
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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

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|----------|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 15/34 Rpt: 40/62 | Spearman, Joah 00090755 |
| 4 | Date | 5 Payee name |
| | 07/01/2022 | Neil, Chopra |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$575.00 | 915 Glenwood Ave SE Apt 711 |
| | | |
| | | Atlanta, GA 30316 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Design services |
| | | Design services |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| ľ | Complete ONLY if direct expenditure to benefit C/Ol | |
| ┡ | | |
| | Date | Payee name |
| | 07/19/2022 | Neil, Chopra |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$400.00 | 915 Glenwood Ave SE Apt 711 |
| | | |
| | | Atlanta, GA 30316 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense |
| | | Design services |
| H | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| ⊨ | D-t- | |
| | Date 08/15/2022 | Payee name |
| | | Neil, Chopra |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$400.00 | 915 Glenwood Ave SE Apt 711 |
| | | |
| | | Atlanta, GA 30316 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense |
| | | Design services |
| \vdash | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| \vdash | | |
| | | |
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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 (Means/Contract Labor

| | Credit Card Payment | The Instruction Guide explains ho | - | esternia category not used above) |
|----------|---|---|--------------------|--|
| 1 | Total pages Schedule F1: | • | <u> </u> | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 16/34 Rpt: 41/62 | Spearman, Joah | | 00090755 |
| 4 | Date | 5 Payee name | | |
| | 09/19/2022 | Neil, Chopra | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Z | Zip Code | |
| | \$400.00 | 915 Glenwood Ave SE Apt 711 | | |
| | | | | |
| | | Atlanta, GA 30316 | | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedu | _{ile)} (b |) Description |
| | OF EXPENDITURE | Consulting Expense | | Check if travel outside of Texas. Complete Schedule T. |
| | | | | Check if Austin, TX, officeholder living expense Design services |
| | | | | Design services |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Offi | ce sough | t Office held |
| ľ | expenditure to benefit C/OI | | cc sough | Cinice held |
| ⊨ | Date | Payes name | | |
| | 08/15/2022 | Payee name Neil, Chopra | | |
| ┡ | | • | 7:- OI- | |
| | Amount (\$) | | Zip Code | |
| | \$200.00 | 915 Glenwood Ave SE Apt 711 | | |
| | | | | |
| | | Atlanta, GA 30316 | | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedu | _{ile)} (b |) Description |
| | EXPENDITURE | Consulting Expense | | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | | | Design services |
| | | | | • |
| Г | Complete ONLY if direct | Candidate/Officeholder name Offi | ce sough | t Office held |
| | expenditure to benefit C/OI | 1 | | |
| | Date | Payee name | | |
| | 08/02/2022 | Paragon Solution Merch | | |
| | Amount (\$) | Payee address; City; State; 2 | Zip Code | |
| | \$147.51 | 2141 E Broadway Rd | | |
| | | | | |
| | | Tempe, AZ 85282 | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedu | _{ile)} (b |) Description |
| | OF EXPENDITURE | Fees | | Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITORE | | | Check if Austin, TX, officeholder living expense |
| | | | | online contribution processing fees |
| <u> </u> | Complete ONLY if alias -t | Condidate/Officeholder 75775 | 00.00::51:: | office hald |
| | Complete ONLY if direct expenditure to benefit C/OI | | ce sough | t Office held |
| \vdash | • | | | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 17/34 Rpt: 42/62 Spearman, Joah 00090755 4 Date Payee name 07/05/2022 Paragon Solution Merch 6 Amount (\$) Payee address; State; Zip Code \$143.58 2141 E Broadway Rd Tempe, AZ 85282 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense online contribution processing fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/02/2022 Paragon Solution Merch Amount (\$) Payee address; City; State; Zip Code \$34.66 2141 E Broadway Rd Tempe, AZ 85282 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense online contribution processing fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/01/2022 Squarespace Amount (\$) Payee address: City: State; Zip Code \$298.77 8 Clarkson St. New York, NY 10014 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Website platform Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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

Travel in Distri Travel Out of I ct Labor OTHER (enter

| | Credit Card Payment | The Instruction Guide explains how to complete this form. | | | | | |
|---|---|--|--|--|--|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) | | | | |
| | Sch: 18/34 Rpt: 43/62 | Spearman, Joah | 00090755 | | | | |
| 4 | Date | 5 Payee name | | | | | |
| | 09/26/2022 | The Dwight and Patty Show LLC | | | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | | | | | |
| | \$1,200.00 | 310 Willie Nelson Blvd | | | | | |
| | | | | | | | |
| | | Austin, TX 78701 | | | | | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | |
| | OF EXPENDITURE | Event Expense | outside of Texas. Complete Schedule T. | | | | |
| | EXPENDITORE | l | n, TX, officeholder living expense | | | | |
| | | performance | at campaign event | | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | | Office field | | | | |
| L | Date | | | | | | |
| | Date | Payee name | | | | | |
| | 07/07/2022 | Travis County Democratic Party | | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | | | |
| | \$373.41 | 1311 E 6th St #B | | | | | |
| | | | | | | | |
| | | Austin, TX 78702 | | | | | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) | | | | | |
| | EXPENDITURE | Contributions/Donations Made by | outside of Texas. Complete Schedule T. , TX, officeholder living expense | | | | |
| | | dues | • | | | | |
| | | | | | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held | | | | |
| | expenditure to benefit C/OI | H | | | | | |
| | Date | Payee name | | | | | |
| | 08/30/2022 | Turo Inc. | | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | | | |
| | \$400.96 | 1455 Market St | | | | | |
| | | | | | | | |
| | | San Fransisco, CA 94103 | | | | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | |
| | OF EXPENDITURE | Travel Out of District | outside of Texas. Complete Schedule T. | | | | |
| | LXI LINDITORE | | ı, TX, officeholder living expense | | | | |
| | | Rental car | | | | | |
| L | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held | | | | |
| | expenditure to benefit C/OI | | Onice neiu | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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 | Committee Gift/A | (Beverage Expense wards/Memorials Expense Services Instruction Guide explains | | pense ages/Contract Labor | | |
|---|--|-----------------------|--|-------------|------------------------------|--|----------------------------|
| 1 | Total pages Schedule F1: | | | | | 3 Filer ID | (Ethics Commission Filers) |
| | Sch: 19/34 Rpt: 44/62 | Spearman, Joa | n | | | 00090755 | |
| 4 | Date | 5 Payee name | | | | | |
| | 08/18/2022 | Turo Inc. | | | - | | |
| 6 | Amount (\$) | 7 Payee address; | | e; Zip Coo | de | | |
| | \$249.10 | 111 Sutter Stree | et F100r 12 | | | | |
| | | San Fransisco, | CA 94101 | | | | |
| 8 | PURPOSE | (a) Category (See Cat | regories listed at the top of this sc | hedule) | (b) Description | | |
| | OF EXPENDITURE | Travel Out of D | strict | | = | outside of Texas. Cor n, TX, officeholder livin | |
| | | | | | Rental car | .,, omocnoluci ilvii | a expense |
| | | | | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeho | older name | Office soug | jht | Office h | eld |
| | Date | Payee name | | | | | |
| | 08/23/2022 | Turo Inc. | | | | | |
| | Amount (\$) | Payee address; | City; State | e; Zip Coo | de | | |
| | \$55.32 | 1455 Market St | • | | | | |
| | | | | | | | |
| | | San Fransisco, | | | | | |
| | PURPOSE OF | | regories listed at the top of this sci | hedule) | (b) Description | outside of Texas. Cor | nnlete Schedule T |
| | EXPENDITURE | Travel Out of D | STRICT | | ш | n, TX, officeholder livin | |
| | | | | | Rental car | | |
| L | | | | | | | |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeho | older name | Office soug | jht | Office h | eld |
| | Date | Payee name | | | | | |
| | 09/20/2022 | Turo Inc. | | | | | |
| | Amount (\$) | Payee address; | City; State | e; Zip Cod | de | | |
| | \$61.44 | 1455 Market St | | | | | |
| | | | | | | | |
| | | San Fransisco, | CA 94103 | | | | |
| | PURPOSE | (a) Category (See Cat | regories listed at the top of this so | hedule) | (b) Description | | |
| | OF EXPENDITURE | Travel Out of D | strict | | | outside of Texas. Cor n, TX, officeholder livin | |
| | | | | | Rental car | i, iz, onicenduel ilvil | a exherine |
| | | | | | | | |
| | Complete ONLY if direct | Candidate/Officeho | older name | Office soug | jht | Office h | eld |
| | expenditure to benefit C/OI | I | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. | | | | | |
|----------|--|--|--|--|--|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | | | | | |
| | Sch: 20/34 Rpt: 45/62 | Spearman, Joah 00090755 | | | | | |
| 4 | Date | 5 Payee name | | | | | |
| | 08/15/2022 | Uber | | | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | | | | | |
| | \$33.95 | 1455 Market St | | | | | |
| | | | | | | | |
| | | San Fransisco, CA 94103 | | | | | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | | | | |
| | | Ride share service | | | | | |
| | | That share service | | | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | | | | | |
| ľ | expenditure to benefit C/OI | | | | | | |
| H | Date | Payee name | | | | | |
| | 08/16/2022 | Uber | | | | | |
| L | | | | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | | | |
| | \$15.96 | 1455 Market St | | | | | |
| | | | | | | | |
| | | San Fransisco, CA 94103 | | | | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. | | | | | |
| | | Check if Austin, TX, officeholder living expense Ride share service | | | | | |
| | | Nue state service | | | | | |
| ⊢ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | | | | | |
| | expenditure to benefit C/OH | | | | | | |
| ⊨ | Data | Para and a second secon | | | | | |
| | Date 08/17/2022 | Payee name Uber | | | | | |
| L | | | | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | | | |
| | \$8.90 | 1455 Market St | | | | | |
| | | | | | | | |
| | | San Fransisco, CA 94103 | | | | | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | |
| | EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. | | | | | |
| | | Check if Austin, TX, officeholder living expense Ride share service | | | | | |
| | | Nue state service | | | | | |
| \vdash | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | | | | | |
| | expenditure to benefit C/OI | | | | | | |
| \vdash | | | | | | | |
| | | | | | | | |
| l | | | | | | | |

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

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 21/34 Rpt: 46/62 | Spearman, Joah 00090755 |
| 4 | Date | 5 Payee name |
| | 08/16/2022 | Uber |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$15.96 | 1455 Market St |
| | | |
| | | San Fransisco, CA 94103 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Ride share service |
| | | Nuc shale service |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | |
| | | |
| | Date | Payee name |
| | 08/17/2022 | Uber |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$29.76 | 1455 Market St |
| | | |
| | | San Fransisco, CA 94103 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Ride share service |
| | | Nue state service |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | | |
| | Date | Payee name |
| | 08/17/2022 | Uber |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$10.90 | 1455 Market St |
| | | |
| | | San Fransisco, CA 94103 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | ZA ZHOHORZ | Check if Austin, TX, officeholder living expense |
| | | Ride share service |
| _ | Operation ONE VIII II | On didn't 10 ff a balden name |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | p = 1 2 25 3/01 | |
| | | |
| | | |

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

| | Credit Card Payment | The Instruction Guide explains how to comp | nplete | e this form. |
|---|-----------------------------|--|--------|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 22/34 Rpt: 47/62 | Spearman, Joah | | 00090755 |
| 4 | Date | 5 Payee name | | |
| | 08/17/2022 | Uber | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | de | |
| | \$25.91 | 1455 Market St | | |
| | | | | |
| | | San Fransisco, CA 94103 | | |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) | (b) [| Description |
| | EXPENDITURE | Travel In District | Ļ | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | | F | Ride share service |
| | | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sough | ht | Office held |
| | expenditure to benefit C/OI | 1 | | |
| | Date | Payee name | | |
| | 08/17/2022 | Uber | | |
| | Amount (\$) | Payee address; City; State; Zip Code | de | |
| | \$10.93 | 1455 Market St | | |
| | | | | |
| | | San Fransisco, CA 94103 | | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) | (b) [| Description |
| | EXPENDITURE | Travel In District | Ļ | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | | F | I ellecturated for the same service |
| | | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sough | ht | Office held |
| | expenditure to benefit C/OI | 1 | | |
| | Date | Payee name | | |
| | 08/22/2022 | Uber | | |
| | Amount (\$) | Payee address; City; State; Zip Code | de | |
| | \$8.43 | 1455 Market St | | |
| | | | | |
| | | San Fransisco, CA 94103 | | |
| | PURPOSE OF | , , | (b) [| Description |
| | EXPENDITURE | Travel In District | Ļ | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | | F | Ride share service |
| | | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sough | jht | Office held |
| | expenditure to benefit C/OI | 1 | | |
| | | | | |
| | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

| | The Instruction Guide explains how to co | emplete this form. |
|---|--|--|
| 1 Total pages Schedule F1: | | 3 Filer ID (Ethics Commission Filers) |
| Sch: 23/34 Rpt: 48/62 | Spearman, Joah | 00090755 |
| 4 Date 08/23/2022 | 5 Payee name Uber | |
| 6 Amount (\$) \$10.90 | 7 Payee address; City; State; Zip Co 1455 Market St | ode |
| | San Fransisco, CA 94103 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ride share service |
| Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sou | ght Office held |
| Date 08/25/2022 | Payee name Uber | |
| Amount (\$) \$14.96 | Payee address; City; State; Zip Co 1455 Market St | ode |
| | San Fransisco, CA 94103 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ride share service |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sou H | ght Office held |
| Date 08/25/2022 | Payee name Uber | |
| Amount (\$) \$11.97 | Payee address; City; State; Zip Co 1455 Market St | ode |
| | San Fransisco, CA 94103 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ride share service |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sou H | nght Office held |
| | | |

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

| | Credit Card Payment | The Instruction Guide explains how to co | mple | ete this form. |
|---|---|--|------|---|
| 1 | Total pages Schedule F1: Sch: 24/34 Rpt: 49/62 | 2 FILER NAME Spearman, Joah | | 3 Filer ID (Ethics Commission Filers) 00090755 |
| 4 | Date 08/25/2022 | 5 Payee name Uber | | |
| 6 | Amount (\$) \$13.99 | 7 Payee address; City; State; Zip Co 1455 Market St San Fransisco, CA 94103 | ode | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ride share service |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sou | ght | Office held |
| | Date 08/25/2022 | Payee name Uber | | |
| | Amount (\$) \$9.91 | Payee address; City; State; Zip Co 1455 Market St San Fransisco, CA 94103 | ode | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ride share service |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office soul | ght | Office held |
| | Date 08/26/2022 | Payee name Uber | | |
| | Amount (\$) \$11.99 | Payee address; City; State; Zip Co 1455 Market St | ode | |
| | | San Fransisco, CA 94103 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ride share service |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sou | ight | Office held |
| | | | | |

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

| | Credit Card Payment | The Instruction Guide explains how to compl | ete this form. |
|---|--|--|---|
| 1 | Total pages Schedule F1: Sch: 25/34 Rpt: 50/62 | 2 FILER NAME Spearman, Joah | 3 Filer ID (Ethics Commission Filers) 00090755 |
| 4 | Date 08/26/2022 | 5 Payee name Uber | |
| 6 | Amount (\$) \$15.95 | 7 Payee address; City; State; Zip Code 1455 Market St San Fransisco, CA 94103 | |
| 8 | PURPOSE OF EXPENDITURE | | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ride share service |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought | Office held |
| | Date 08/26/2022 | Payee name Uber | |
| | Amount (\$) \$10.96 | Payee address; City; State; Zip Code 1455 Market St San Fransisco, CA 94103 | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ride share service |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought | Office held |
| | Date 08/26/2022 | Payee name Uber | |
| | Amount (\$) \$10.94 | Payee address; City; State; Zip Code 1455 Market St | |
| | | San Fransisco, CA 94103 | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ride share service |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | 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 Committee

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

| | Credit Card Payment | The Instruction Guide explains how to co | mple | ete this form. |
|---|---|--|------|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 26/34 Rpt: 51/62 | Spearman, Joah | | 00090755 |
| 4 | Date | 5 Payee name | | <u> </u> |
| | 08/26/2022 | Uber | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Co | ode | |
| | \$9.91 | 1455 Market St | | |
| | | | | |
| | | San Fransisco, CA 94103 | | |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) | (b) | Description |
| | EXPENDITURE | Travel In District | | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | | | Ride share service |
| | | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sou | ight | Office held |
| | expenditure to benefit C/OI | 1 | | |
| | Date | Payee name | | |
| | 08/29/2022 | Uber | | |
| | Amount (\$) | Payee address; City; State; Zip Co | ode | |
| | \$15.94 | 1455 Market St | | |
| | | | | |
| | | San Fransisco, CA 94103 | | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) | (b) | Description |
| | EXPENDITURE | Travel In District | | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | | | Ride share service |
| | | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sou | ight | Office held |
| | expenditure to benefit C/OI | 1 | | |
| | Date | Payee name | | |
| | 08/29/2022 | Uber | | |
| | Amount (\$) | Payee address; City; State; Zip Co | ode | |
| | \$13.93 | 1455 Market St | | |
| | | 0.5. | | |
| | | San Fransisco, CA 94103 | | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) | Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Travel III District | | Check if Austin, TX, officeholder living expense |
| | | | | Ride share service |
| | | | | |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sou | ight | Office held |
| | parameter action of the | | | |
| | | | | |
| | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ising Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 27/34 Rpt: 52/62 | Spearman, Joah 00090755 |
| 4 Date | 5 Payee name |
| 08/29/2022 | Uber |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$12.93 | 1455 Market St |
| | |
| | San Fransisco, CA 94103 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense Ride share service |
| | Nuc shale service |
| Complete CNII V if direct | Candidate/Officeholder name Office cought Office hold |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| · | |
| Date | Payee name |
| 08/29/2022 | Uber |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$11.96 | 1455 Market St |
| | |
| | San Fransisco, CA 94103 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Ride share service |
| | Titue Share Service |
| Complete <u>ONLY</u> if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| <u> </u> | |
| Date | Payee name |
| 08/29/2022 | Uber |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$9.94 | 1455 Market St |
| | |
| | San Fransisco, CA 94103 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | Ride share service |
| Operation Children | On didn't 10 ff a balden name |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| p = 1 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 | |
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| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising Expense 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 Salarice Magnet/Contract Labor

nse Travel in Districtionse Travel out of E ges/Contract Labor OTHER (enter

| | Credit Card Payment | The Instruction Guide explains how to co | • | ete this form. | | | | |
|---|--|--|-----|---|--|--|--|--|
| 1 | Total pages Schedule F1: Sch: 28/34 Rpt: 53/62 | 2 FILER NAME Spearman, Joah | | 3 Filer ID (Ethics Commission Filers) 00090755 | | | | |
| 4 | Date | | | | | | | |
| 4 | 08/29/2022 | 5 Payee name Uber | | | | | | |
| 6 | Amount (\$) \$10.98 | 7 Payee address; City; State; Zip Co 1455 Market St San Fransisco, CA 94103 | de | | | | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ride share service | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sou | ght | Office held | | | | |
| | Date | Payee name | | | | | | |
| | 08/29/2022 | Uber | | | | | | |
| | Amount (\$) \$12.95 | Payee address; City; State; Zip Co 1455 Market St San Fransisco, CA 94103 | de | | | | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ride share service | | | | |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office soul | ght | Office held | | | | |
| | Date 08/31/2022 | Payee name Uber | | | | | | |
| | Amount (\$) \$18.90 | Payee address; City; State; Zip Co 1455 Market St San Fransisco, CA 94103 | de | | | | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ride share service | | | | |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office soul | ght | Office held | | | | |
| | | | | | | | | |

SCHEDULE F1

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

Fees Office Over Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E Legal Services Salaries/V

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

| | Credit Card Payment | The Instruction Guide explains how to comp | olete this | form. | | |
|---|-----------------------------|--|------------|--|-----------|----------------------------|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | 3 | Filer ID | (Ethics Commission Filers) |
| | Sch: 29/34 Rpt: 54/62 | Spearman, Joah | | | 00090755 | |
| 4 | Date | 5 Payee name | | • | | |
| | 08/31/2022 | Uber | | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |) | | | |
| | \$14.98 | 1455 Market St | | | | |
| | | | | | | |
| | | San Fransisco, CA 94103 | | | | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) |) Descri | | | |
| | OF EXPENDITURE | Travel In District | | eck if travel outsideck if Austin, TX, | | plete Schedule T. |
| | | | | share service | | Гехрепае |
| | | | | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought | t | | Office he | eld |
| | expenditure to benefit C/OI | 1 | | | | |
| | Date | Payee name | | | | |
| | 08/31/2022 | Uber | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code |) | | | |
| | \$13.95 | 1455 Market St | | | | |
| | | | | | | |
| | | San Fransisco, CA 94103 | | | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) |) Descri | iption | | |
| | OF EXPENDITURE | Travel In District | | eck if travel outsideck if Austin, TX, | | plete Schedule T. |
| | | | | share service | | expense |
| | | | | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | t | | Office he | eld |
| | expenditure to benefit C/OI | 1 | | | | |
| | Date | Payee name | | | | |
| | 08/31/2022 | Uber | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code |) | | | |
| | \$1.00 | 1455 Market St | | | | |
| | | | | | | |
| | | San Fransisco, CA 94103 | | | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) |) Descri | iption | | |
| | OF EXPENDITURE | Travel In District | | eck if travel outsideck if Austin, TX, | | plete Schedule T. |
| | | | | share service | | expense |
| | | | | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | t | | Office he | eld |
| | expenditure to benefit C/OI | 1 | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|----------|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 30/34 Rpt: 55/62 | Spearman, Joah 00090755 |
| 4 | Date | 5 Payee name |
| | 08/30/2022 | Uber |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$31.99 | 1455 Market St |
| | | |
| | | San Fransisco, CA 94103 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Ride share service |
| | | Ride Strate Service |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| ľ | Complete ONLY if direct expenditure to benefit C/OI | |
| ┡ | | |
| | Date | Payee name |
| | 08/31/2022 | Uber |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$21.91 | 1455 Market St |
| | | |
| | | San Fransisco, CA 94103 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense |
| | | Ride share service |
| L | Complete ONLY if direct | Condidate/Officeholder name |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| L | · | |
| | Date | Payee name |
| | 08/31/2022 | Uber |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$9.92 | 1455 Market St |
| | | |
| | | San Fransisco, CA 94103 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense |
| | | Ride share service |
| \vdash | Commission ON II V 15 allians | Condidate/Officeholder name |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| L | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage I
Contributions/ Donations Made By - Gift/Awards/Men

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Leaal Services Salaries/Waacs/Contract Labor

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|----------|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 31/34 Rpt: 56/62 | Spearman, Joah 00090755 |
| 4 | Date | 5 Payee name |
| | 09/07/2022 | Uber |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$9.93 | 1455 Market St |
| | | |
| | | San Fransisco, CA 94103 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Ride share service |
| | | That share service |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| ľ | expenditure to benefit C/OI | |
| H | Date | Payee name |
| | 09/08/2022 | Uber |
| ┝ | Amount (\$) | Payee address; City; State; Zip Code |
| | \$10.52 | 1455 Market St |
| | Ψ10.32 | 1455 Market St |
| | | San Fransisco, CA 94103 |
| Н | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | LXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | | Ride share service |
| ┡ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| ⊨ | Data | |
| | Date | Payee name |
| | 09/08/2022 | Uber |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$7.39 | 1455 Market St |
| | | |
| | | San Fransisco, CA 94103 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Ride share service |
| | | |
| \vdash | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 1 | expenditure to benefit C/OI | |
| H | | |
| | | |
| l | | |

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

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|----------|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 32/34 Rpt: 57/62 | Spearman, Joah 00090755 |
| 4 | Date | 5 Payee name |
| | 09/09/2022 | Uber |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$27.46 | 1455 Market St |
| | | |
| | | San Fransisco, CA 94103 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Ride share service |
| | | Nue shale service |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 | expenditure to benefit C/O | |
| \vdash | Data | David and the second se |
| | Date | Payee name |
| | 09/08/2022 | United Airlines |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$437.20 | 233 South Wacker Dr. |
| | | |
| | | Chicago, IL 60606 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel Out of District X Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Airfare |
| | | Aireac |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | - · · · · · · · · · · · · · · · · · · · |
| - | Date | Payee name |
| | 09/15/2022 | Payee name Wildfire Mail Co |
| | | |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$3,982.80 | 750 17th St. Suite 500 |
| | | |
| | | Washington, DC 20006 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Mail services |
| | | Mail Scrylocs |
| \vdash | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| - | | |
| | | |
| | | |

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

| | Credit Card Payment | The Instruction Guide explains how to complete | e this form. |
|---|--|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 33/34 Rpt: 58/62 | Spearman, Joah | 00090755 |
| 4 | Date | 5 Payee name | • |
| | 07/14/2022 | Wildfire Mail Co | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | |
| | \$3,040.00 | 750 17th St. Suite 500 | |
| | | | |
| | | Washington, DC 20006 | |
| 8 | 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. |
| | EXI ENDITORE | L | Check if Austin, TX, officeholder living expense Mail services |
| | | | vidii sei vices |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/O | | Cilide Held |
| _ | Date | Payee name | |
| | 07/06/2022 | Worley Printing | |
| _ | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$427.59 | 3217 N Interstate 35 Frontage Rd | |
| | Ψ-21.00 | 0217 William State 60 Frontage Na | |
| | | Austin, TX 78722 | |
| | PURPOSE | | 2 |
| | OF | (a) Category (See Categories listed at the top of this schedule) Printing Expense | Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Trinking Expense | Check if Austin, TX, officeholder living expense |
| | | | Campaign literature |
| | | | |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought | Office held |
| | experientare to benefit 6/6 | ' | |
| | Date | Payee name | |
| | 07/18/2022 | Worley Printing | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$263.31 | 3217 N Interstate 35 Frontage Rd | |
| | | | |
| | | Austin, TX 78722 | |
| | 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. |
| | | L | Check if Austin, TX, officeholder living expense Campaign literature |
| | | | - Sampangri maratara |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/O | | |
| | | | |
| | | | |
| | | | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

| | Credit Card Payment | The Instruction Guide explains how to co | mple | ete this form. |
|---|--|--|------|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 34/34 Rpt: 59/62 | Spearman, Joah | | 00090755 |
| 4 | Date | 5 Payee name | | - |
| | 09/02/2022 | Worley Printing | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Co | de | |
| | \$1,391.00 | 3217 N Interstate 35 Frontage Rd | | |
| | | | | |
| | | Austin, TX 78722 | | |
| 8 | 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. |
| | EXPENDITURE | - | | Check if Austin, TX, officeholder living expense |
| | | | | Campaign literature |
| L | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sould | ght | Office held |
| | · | | | |
| | Date | Payee name | | |
| | 07/01/2022 | Worley Printing | | |
| | Amount (\$) | Payee address; City; State; Zip Co | de | |
| | \$1,877.82 | 3217 N Interstate 35 Frontage Rd | | |
| | | | | |
| | | Austin, TX 78722 | | |
| | 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 Yard signs |
| | | | | Tala digito |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sou | aht | Office held |
| | expenditure to benefit C/O | | 9 | |
| | Date | Payee name | | |
| | 09/26/2022 | Worley Printing | | |
| | Amount (\$) | Payee address; City; State; Zip Co | da | |
| | \$385.87 | 3217 N Interstate 35 Frontage Rd | uc | |
| | φοσο.σ1 | 0217 Willierstate 00 Frontage Na | | |
| | | Austin, TX 78722 | | |
| | DUDDOG | | 4. | |
| | PURPOSE OF | , , | (D) | Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Printing Expense | | Check if Austin, TX, officeholder living expense |
| | | | | Printing |
| | | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sour | ght | Office held |
| | expenditure to benefit C/O | 1 | | |
| | | | | |
| | | | | |
| | | | | |

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

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 explains | | xpense Vages/Contract Labor | Travel in Di Travel Out OTHER (er | |
|---|--|-------------------------|--|----------|--------------------------------|---|--|
| 1 | Total pages Schedule G: | 2 FILER NAM | E | | | 3 Filer ID | (Ethics Commission Filers) |
| | Sch: 1/2 Rpt: 60/62 | Spearman, | Joah | | | 000907 | 55 |
| 4 | Date | 5 Payee name | ; | | | 1 | |
| | 09/09/2022 | A Mini Stor | | | | | |
| 6 | Amount (\$) | 7 Payee addre | ess; City; State | ; Zip Co | ode | | |
| | \$132.95 | 2381 E Hw | y 71 | | | | |
| | Reimbursement from political contributions intended | Del Valle, ⁻ | TX 78617 | | | | |
| 8 | PURPOSE | (a) Category (s | See Categories listed at the top of this sch | nedule) | (b) Description | Check if travel | outside of Texas. Complete Schedule T. |
| | OF EXPENDITURE | Office Ove | rhead/Rental Expense | | | Check if Austin | n, TX, officeholder living expense |
| | EX. ENDITORE | | | | storage | | |
| | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Office | cholder name | | Office sought | | Office held |
| | Date | Payee name |) | | | | |
| | 09/26/2022 | Calderon, I | Ever | | | | |
| | Amount (\$) | Payee addre | ess; City; State | ; Zip Co | ode | | |
| | \$150.00 | 1110 Twist | ed Crk | | | | |
| | Reimbursement from political contributions intended | Kyle, TX 78 | 8640-4568 | | | | |
| | PURPOSE | Category (s | See Categories listed at the top of this sch | nedule) | Description | Check if travel | outside of Texas. Complete Schedule T. |
| | OF EXPENDITURE | Consulting | Expense | | | Check if Austir | n, TX, officeholder living expense |
| | | | | | photos | | |
| | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Office | eholder name | | Office sought | | Office held |
| | Date | Payee name | <u>,</u> | | | | |
| | 09/09/2022 | Enterprise | Rent-A-Car | | | | |
| | Amount (\$) | Payee addre | ess; City; State | ; Zip Co | ode | | |
| | \$328.13 | 600 Corpo | rate Park Dr | | | | |
| | Reimbursement from political contributions intended | Saint Louis | s, MO 63105 | | | | |
| | PURPOSE | Category (s | See Categories listed at the top of this sch | nedule) | Description | Check if travel | outside of Texas. Complete Schedule T. |
| | OF EXPENDITURE | Travel Out | of District | | | Check if Austir | n, TX, officeholder living expense |
| | | | | | rental car | | |
| | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Office | cholder name | | Office sought | | Office held |
| | | | | | | | |

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(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) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 2/2 Rpt: 61/62 Spearman, Joah 00090755 Date Payee name 09/14/2022 Health Alliance for Austin Musicians Amount (\$) Payee address; City: State; Zip Code 3010 S Lamar Blvd #200 \$75.00 Reimbursement from political contributions intended Х Austin, TX 78704 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/10/2022 **United Airlines** Amount (\$) Payee address; City; State; Zip Code \$236.21 233 South Wacker Dr. Reimbursement from political contributions Χ Chicago, IL 60606 intended PURPOSE Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Travel Out of District **EXPENDITURE** airfare Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

| SCH | | |
|-----|--|--|
| | | |
| | | |

| The Instruction Guide explains how to complete this form. | | | | | 1 Total pages Schedule T: Sch: 1/1 Rpt: 62/62 | |
|---|---|-------------|--------------|------------|--|--|
| 2 FILER NAME | | | | | 3 Filer ID (Ethics Commission Filers) | |
| Spearman, Joah 00090755 | | | | | | |
| 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Delta Airlines | | | | | | |
| 5 Contribution / Expenditure reported on: | | | | | | |
| I ` | Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D X Schedule F1 | | | | | |
| Schedule F2 | 브 | Schedule F4 | Schedule G | Schedule H | Schedule COH-UC | |
| 6 Dates of Travel | es of Travel 7 Name of person(s) traveling | | | | | |
| | Spearman, Joah | | | | | |
| 8 Departure city or name of departure location | | | | | | |
| 08/12/2022 | | | | | | |
| | | | | | | |
| 08/12/2022 Atlanta | | | | | | |
| 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) | | | | | | |
| Commercial Airplane fundraising event planning | | | | | | |
| Name of Contributor / Corporation or Labor Organization / Pledgor /Payee | | | | | | |
| United Airlines | | | | | | |
| Contribution / Expenditure reported on: | | | | | | |
| Schedule A2 | Schedule B Schedule B(J) Schedule C2 Schedule D X Schedule F1 | | | | | |
| Schedule F2 | | Schedule F4 | Schedule G | Schedule H | Schedule COH-UC | |
| Dates of Travel | Name of person(s) traveling | | | | | |
| | Spearman, Joah | | | | | |
| | Departure city or name of departure location | | | | | |
| 08/08/2022 | Austin | | | | | |
| | Destination city or name of destination location | | | | | |
| 08/08/2022 | Chicago | | | | | |
| Means of transportation Purpose of travel (including name of conference, seminar, or other event) | | | | | | |
| Commercial Airplane campaign meetings | | | | | | |
| Name of Contributor / Corporation or Labor Organization / Pledgor /Payee | | | | | | |
| United Airlines | | | | | | |
| Contribution / Expenditure reported on: | | | | | | |
| Schedule A2 | Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1 | | | | | |
| Schedule F2 | | Schedule F4 | X Schedule G | Schedule H | Schedule COH-UC | |
| Dates of Travel | vel Name of person(s) traveling | | | | | |
| | Spearman, Joah | | | | | |
| | Departure city or name of departure location | | | | | |
| 08/09/2022 | 98/09/2022 Austin | | | | | |
| Destination city or name of destination location | | | | | | |
| 08/09/2022 | Chicago | | | | | |
| Means of transportation Purpose of travel (including name of conference, seminar, or other event) | | | | | | |
| Commercial Airplane campaign meetings | | | | | | |
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