

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers) 00090751		2 Total pages filed: 28		OFFICE USE ONLY		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	Date Received		
	Stephanie M			ELECTRONICALLY FILED		
	NICKNAME	LAST	SUFFIX	10/27/2022		
	Bazan			Date Hand-delivered or Date Postmarked		
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Receipt #		
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit		Amount		
	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		Date Processed		
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)		Date Imaged		
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year
	07/01/2022		THROUGH		09/29/2022	

6 EXPLANATION OF CORRECTION

We needed to correct three campaign contributions over \$200 in the reporting period that did not have occupation/employer listed. We've corrected those three contributions. Additionally, the campaign also received a campaign contribution via mail that did not arrive until after the filing deadline but was dated prior to September 29th. We have included that contribution in the updated report.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

☐ **Semiannual reports:** I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☒ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Stephanie M Bazan

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090751		2 Total pages filed: 28	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Stephanie M		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/27/2022		
	NICKNAME LAST SUFFIX Bazan				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE P.O. BOX 151654 Austin, TX 78715			Date Hand-delivered or Date Postmarked	
				Receipt # Amount	
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Amanda				
	NICKNAME LAST SUFFIX Eldridge				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7821 Oteka Cv Austin, TX 78735				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 694-6784				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/01/2022 09/29/2022				
10 ELECTION	ELECTION DATE Month Day Year 11/08/2022		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) None Travis		12 OFFICE SOUGHT (if known) Council Member, District 5		

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME	Bazan, Stephanie M	14 Filer ID	(Ethics Commission Filers)
		00090751	

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

16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,674.12
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	183.58
	4.	TOTAL POLITICAL EXPENDITURES	\$	15,386.49
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	42,983.02
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFADAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Stephanie M Bazan

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

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

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18 FILER NAME Bazan, Stephanie M		19 Filer ID (Ethics Commission Filers) 00090751
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,224.12
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 450.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 15,202.91
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 183.58
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/11 Rpt: 5/28
2 FILER NAME Bazan, Stephanie M		3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/22/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alaniz-Moyer, Ashley <hr/> 6 Contributor address; City; State; Zip Code 20017 Navarre Ter Austin, TX 78660	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Consultant and NonProfit Executive		9 Employer (See Instructions) Hispanic Scholarship Consortium
Date 09/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Annoni, Chris <hr/> Contributor address; City; State; Zip Code 3210 Centralia Cv Austin, TX 78745	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 09/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armbrust, David <hr/> Contributor address; City; State; Zip Code 2807 Regents Park Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown PLLC
Date 08/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banda, Rosemary <hr/> Contributor address; City; State; Zip Code 1101 Echo Lane Austin, TX 78746	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Community Affairs		Employer (See Instructions) NA
Date 09/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Taylor <hr/> Contributor address; City; State; Zip Code 7813 Finch Trail Austin, TX 78745	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Developer Advocate		Employer (See Instructions) PlanetScale

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/11 Rpt: 6/28
2 FILER NAME Bazan, Stephanie M		3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazan, Joseph <hr/> 6 Contributor address; City; State; Zip Code 5419 Constance St New Orleans, TX 70115	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) College Counselor		9 Employer (See Instructions) Delgado Community College
Date 09/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beliveau, Emmett <hr/> Contributor address; City; State; Zip Code 2205 Sunny Slope Dr Austin, TX 78703	Amount of Contribution (\$) \$450.00
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) C3 Presents
Date 09/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breen, Mary <hr/> Contributor address; City; State; Zip Code 2627 Kinney Oaks Ct Austin, TX 78704	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Retired nurse		Employer (See Instructions) NA
Date 09/06/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brune, Michele <hr/> Contributor address; City; State; Zip Code 1080 Giberson Way Buda, TX 78610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) NA
Date 08/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Johanna <hr/> Contributor address; City; State; Zip Code 114 Papawai Dr Bastrop, TX 78602	Amount of Contribution (\$) \$133.26
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/11 Rpt: 7/28
2 FILER NAME Bazan, Stephanie M		3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/07/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cenkus, Brett <hr/> 6 Contributor address; City; State; Zip Code 2308 Independence Drive Austin, TX 78745	7 Amount of Contribution (\$) \$450.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Cenkus Law PC
Date 08/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cofer, George <hr/> Contributor address; City; State; Zip Code 3306 Gentry Drive Austin, TX 78746	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Conservation Consultant		Employer (See Instructions) NA
Date 09/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conti, John <hr/> Contributor address; City; State; Zip Code 212 Mia Drive Lakeway, TX 78738	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Corporate Vice President		Employer (See Instructions) New York Life
Date 09/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corona, Christina <hr/> Contributor address; City; State; Zip Code 4411 Tello Path Austin, TX 78749	Amount of Contribution (\$) \$450.00
Principal occupation / Job title (See Instructions) Director of Operations		Employer (See Instructions) National Instruments
Date 08/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Costello, Thomas <hr/> Contributor address; City; State; Zip Code 1411 Gracy Farms Ln Apt 126 Austin, TX 78758	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Economist		Employer (See Instructions) Texas Comptroller of Public Accounts

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/11 Rpt: 8/28
2 FILER NAME Bazan, Stephanie M		3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/16/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davies, Leah <hr/> 6 Contributor address; City; State; Zip Code 401 Wye Oak St Austin, TX 78748	7 Amount of Contribution (\$) \$26.63
8 Principal occupation / Job title (See Instructions) Social worker		9 Employer (See Instructions) CLEAN Cause
Date 08/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Avila, Natalie <hr/> Contributor address; City; State; Zip Code 6205 Albany Sleigh Drive Del Valle, TX 78617	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Stay at home mom		Employer (See Instructions) NA
Date 09/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faddis, Zach <hr/> Contributor address; City; State; Zip Code 1100 Emmitt Run, Austin, TX 78721	Amount of Contribution (\$) \$263.47
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Press Ganey
Date 08/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fernandez, Gloria <hr/> Contributor address; City; State; Zip Code 12205 Sky Harbor Drive Del Valle, TX 78617	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 09/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fernandez, Gloria <hr/> Contributor address; City; State; Zip Code 12205 Sky Harbor Drive Del Valle, TX 78617	Amount of Contribution (\$) \$42.42
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/11 Rpt: 9/28
2 FILER NAME Bazan, Stephanie M		3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/20/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Brandon <hr/> 6 Contributor address; City; State; Zip Code 9817 Chirpy Way Manor, TX 78653	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Government relations		9 Employer (See Instructions) NA
Date 09/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Adiee <hr/> Contributor address; City; State; Zip Code 2401 Aldrich St Apt 415 Austin, TX 78723	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) ACF
Date 07/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Delisa <hr/> Contributor address; City; State; Zip Code 11611 Sunset Drive Austin, TX 78748	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Admin		Employer (See Instructions) Austin Oaks Hospital
Date 07/18/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Linda <hr/> Contributor address; City; State; Zip Code 804 Spofford St Austin, TX 78704	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Retired Nurse Practitioner		Employer (See Instructions) NA
Date 09/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamid, Kaamilah <hr/> Contributor address; City; State; Zip Code 5110 Lancaster Court Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/11 Rpt: 10/28
2 FILER NAME Bazan, Stephanie M		3 Filer ID (Ethics Commission Filers) 00090751
4 Date 08/31/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawley, Bobby <hr/> 6 Contributor address; City; State; Zip Code 114 Papawai Dr Bastrop, TX 78602	7 Amount of Contribution (\$) \$450.00
8 Principal occupation / Job title (See Instructions) Sales Manager		9 Employer (See Instructions) Unsubcentral
Date 08/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Dana <hr/> Contributor address; City; State; Zip Code 7600 Hansbrough Street New Orleans, TX 70127	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) NA
Date 09/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huse, Kelsey <hr/> Contributor address; City; State; Zip Code 3607 S Lamar Blvd Apt 1322 Austin, TX 78704	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Software engineer		Employer (See Instructions) Realtor.com
Date 09/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huse, Kelsey <hr/> Contributor address; City; State; Zip Code 3607 S Lamar Blvd Apt 1322 Austin, TX 78704	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Realtor.com
Date 09/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaminsky, Catherine <hr/> Contributor address; City; State; Zip Code 1000 E 5th St Apt 619 Austin, TX 78702	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Organizing Director		Employer (See Instructions) Jay Kleberg for Texas Land Commissioner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/11 Rpt: 11/28
2 FILER NAME Bazan, Stephanie M		3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/22/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kazi, Fayez <hr/> 6 Contributor address; City; State; Zip Code 11601 Tedford Austin, TX 78753	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Civilitude
Date 09/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Michael <hr/> Contributor address; City; State; Zip Code 2450 Wickersham Ln Apt 1201 Austin, TX 78741	Amount of Contribution (\$) \$210.84
Principal occupation / Job title (See Instructions) Account Executive		Employer (See Instructions) WalkMe
Date 07/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Limon, Tracy <hr/> Contributor address; City; State; Zip Code 1900 Wheless Ln Austin, TX 78723	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Contract and Compliance Manager		Employer (See Instructions) NA
Date 08/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logan, Aryton <hr/> Contributor address; City; State; Zip Code 1000 San Marcos Street Austin, TX 78702	Amount of Contribution (\$) \$450.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Streamlined Analytics LLC
Date 07/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombrana, Julie <hr/> Contributor address; City; State; Zip Code 111 Camino Real st San Angelo, TX 76904	Amount of Contribution (\$) \$31.89
Principal occupation / Job title (See Instructions) Stay at Home Parent		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/11 Rpt: 12/28
2 FILER NAME Bazan, Stephanie M		3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Marion <hr/> 6 Contributor address; City; State; Zip Code 1409 Redd Street Austin, TX 78745	7 Amount of Contribution (\$) \$26.63
8 Principal occupation / Job title (See Instructions) Ride Director		9 Employer (See Instructions) Lone Star Circle of Care
Date 07/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Marion <hr/> Contributor address; City; State; Zip Code 1409 Redd St Austin, TX 78745	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Ride Director		Employer (See Instructions) Lone Star Circle of Care
Date 09/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Felicity <hr/> Contributor address; City; State; Zip Code 2121 Melridge Pl Austin, TX 78704	Amount of Contribution (\$) \$450.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Tipit LLC
Date 09/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moyer, William <hr/> Contributor address; City; State; Zip Code 20017 Navarre Ter Pflugerville, TX 78660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) Civiltude
Date 09/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivas, Greta <hr/> Contributor address; City; State; Zip Code 8000B Clydesdale Dr. Austin, TX 78745	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/11 Rpt: 13/28
2 FILER NAME Bazan, Stephanie M		3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/13/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Denise <hr/> 6 Contributor address; City; State; Zip Code 6928 Robert Dixon Dr Austin, TX 78749	7 Amount of Contribution (\$) \$450.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) SLHA, LLP
Date 09/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poteet, Brian <hr/> Contributor address; City; State; Zip Code 405 W North Loop Blvd Unit 1 Austin, TX 78751	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Cutsforth Inc
Date 08/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poteet, Brian <hr/> Contributor address; City; State; Zip Code 405 W North Loop Blvd Unit 1 Austin, TX 78751	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Cutsforth Inc
Date 09/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Recko, Colin <hr/> Contributor address; City; State; Zip Code 4410 Mount Vernon Dr Austin, TX 78745	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Meta
Date 09/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rios, Christopher <hr/> Contributor address; City; State; Zip Code 18100 Gantry Dr. Pflugerville, TX 78660	Amount of Contribution (\$) \$158.21
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Wells Fargo

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/11 Rpt: 14/28
2 FILER NAME Bazan, Stephanie M		3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/23/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spearman, Joah <hr/> 6 Contributor address; City; State; Zip Code PO Box 6149 Austin, TX 78762	7 Amount of Contribution (\$) \$105.58
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Localeur
Date 09/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stew, Peter <hr/> Contributor address; City; State; Zip Code 4502 Russell Dr Austin, TX 78745	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 09/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Latina List <hr/> Contributor address; City; State; Zip Code P.O. Box 64025 Fort Worth, TX 76164	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virani, Alim <hr/> Contributor address; City; State; Zip Code 1621 East 6th Street Apt 2413 Austin, TX 78702	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Engineering Manager		Employer (See Instructions) Twitter
Date 09/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virani, Alim <hr/> Contributor address; City; State; Zip Code 1622 East 6th Street Apt 2413 Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineering Manager		Employer (See Instructions) Twitter

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/11 Rpt: 15/28
2 FILER NAME Bazan, Stephanie M		3 Filer ID (Ethics Commission Filers) 00090751
4 Date 07/04/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woody, Susanna <hr/> 6 Contributor address; City; State; Zip Code 7433 Montezuma Street Austin, TX 78744	7 Amount of Contribution (\$) \$52.95
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) NA
Date 09/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthington, Matt <hr/> Contributor address; City; State; Zip Code 8008 Hillock Terrace Austin, TX 78744	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Director of Data Science		Employer (See Instructions) Longevity Partners
Date 09/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanas, Elyssa <hr/> Contributor address; City; State; Zip Code 5419 Constance St New Orleans, TX 70115	Amount of Contribution (\$) \$55.58
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 16/28	
2 FILER NAME Bazan, Stephanie M		3 Filer ID (Ethics Commission Filers) 00090751	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 09/14/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molly Cox Consulting LLC	8 Amount of contribution (\$) \$450.00	9 In-kind contribution description Consulting services
7 Contributor address; City; State; Zip Code 22 Jeanette Drive San Antonio, TX 78216		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/12 Rpt: 17/28	2 FILER NAME Bazan, Stephanie M	3 Filer ID (Ethics Commission Filers) 00090751
4 Date 08/22/2022	5 Payee name Austin CLC of the AFL-CIO	
6 Amount (\$) \$215.00	7 Payee address; City; State; Zip Code 1106 Lavaca Street Ste 200 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad charge
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/08/2022	Payee name Azul - Consulting	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 1112 Montezuma San Antonio, TX 78207	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2022	Payee name Azul - Consulting	
Amount (\$) \$5,857.62	Payee address; City; State; Zip Code 1112 Montezuma San Antonio, TX 78207	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/12 Rpt: 18/28	2 FILER NAME Bazan, Stephanie M	3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/01/2022	5 Payee name CheckMark Typesetting	
6 Amount (\$) \$3,402.95	7 Payee address; City; State; Zip Code 3217 North IH 35 Austin, TX 78722	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/01/2022	Candidate/Officeholder name City of Austin	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 124 W 8th St Ste 116 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ballot Application
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/01/2022	Candidate/Officeholder name DonateWay	
Amount (\$) \$7.47	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/12 Rpt: 19/28	2 FILER NAME Bazan, Stephanie M	3 Filer ID (Ethics Commission Filers) 00090751
4 Date 07/04/2022	5 Payee name DonateWay	
6 Amount (\$) \$2.95	7 Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/18/2022	Candidate/Officeholder name Payee name DonateWay	
Amount (\$) \$2.95	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/30/2022	Candidate/Officeholder name Payee name DonateWay	
Amount (\$) \$1.63	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/12 Rpt: 20/28	2 FILER NAME Bazan, Stephanie M	3 Filer ID (Ethics Commission Filers) 00090751
4 Date 08/04/2022	5 Payee name DonateWay	
6 Amount (\$) \$5.58	7 Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/20/2022	Candidate/Officeholder name Payee name DonateWay	
Amount (\$) \$5.58	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/29/2022	Candidate/Officeholder name Payee name DonateWay	
Amount (\$) \$2.06	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/12 Rpt: 21/28	2 FILER NAME Bazan, Stephanie M	3 Filer ID (Ethics Commission Filers) 00090751
4 Date 08/31/2022	5 Payee name DonateWay	
6 Amount (\$) \$47.67	7 Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/06/2022	Candidate/Officeholder name Payee name DonateWay	
Amount (\$) \$1.56	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/07/2022	Candidate/Officeholder name Payee name DonateWay	
Amount (\$) \$29.58	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/12 Rpt: 22/28	2 FILER NAME Bazan, Stephanie M	3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/08/2022	5 Payee name DonateWay	
6 Amount (\$) \$1.56	7 Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/11/2022	Candidate/Officeholder name Payee name DonateWay	
Amount (\$) \$24.31	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/13/2022	Candidate/Officeholder name Payee name DonateWay	
Amount (\$) \$24.00	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/12 Rpt: 23/28	2 FILER NAME Bazan, Stephanie M	3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/14/2022	5 Payee name DonateWay	
6 Amount (\$) \$2.95	7 Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/16/2022	Candidate/Officeholder name Payee name DonateWay	
Amount (\$) \$1.63	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/20/2022	Candidate/Officeholder name Payee name DonateWay	
Amount (\$) \$2.80	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/12 Rpt: 24/28	2 FILER NAME Bazan, Stephanie M	3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/21/2022	5 Payee name DonateWay	
6 Amount (\$) \$2.95	7 Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/22/2022	Candidate/Officeholder name Payee name DonateWay	
Amount (\$) \$13.55	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/23/2022	Candidate/Officeholder name Payee name DonateWay	
Amount (\$) \$5.58	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/12 Rpt: 25/28	2 FILER NAME Bazan, Stephanie M	3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/25/2022	5 Payee name DonateWay	
6 Amount (\$) \$24.00	7 Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/27/2022	Candidate/Officeholder name Payee name DonateWay	
Amount (\$) \$2.95	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/28/2022	Candidate/Officeholder name Payee name DonateWay	
Amount (\$) \$48.43	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/12 Rpt: 26/28	2 FILER NAME Bazan, Stephanie M	3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/29/2022	5 Payee name DonateWay	
6 Amount (\$) \$69.30	7 Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website service fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/01/2022	Payee name Jake Webber	
Amount (\$) \$800.00	Payee address; City; State; Zip Code 1201 Columbia #A San Marcos, TX 78666	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/15/2022	Payee name Jake Webber	
Amount (\$) \$1,200.00	Payee address; City; State; Zip Code 1201 Columbia #A San Marcos, TX 78666	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/12 Rpt: 27/28	2 FILER NAME Bazan, Stephanie M	3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/07/2022	5 Payee name Jake Webber	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 1201 Columbia #A San Marcos, TX 78666	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/26/2022	Payee name McDonalds	
Amount (\$) \$14.05	Payee address; City; State; Zip Code 2114 W Slaughter Ln Austin, TX 78748	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Snack for Team
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/02/2022	Payee name Texas Democratic Party	
Amount (\$) \$540.00	Payee address; City; State; Zip Code P.O. Box 116 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense VAN account setup
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/12 Rpt: 28/28	2 FILER NAME Bazan, Stephanie M	3 Filer ID (Ethics Commission Filers) 00090751
4 Date 09/15/2022	5 Payee name Walmart	
6 Amount (\$) \$92.25	7 Payee address; City; State; Zip Code 5017 W Highway 290 Austin, TX 78735	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held