

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) 00090501		2 Total pages filed: 17	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Jennifer M		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/17/2023		
	NICKNAME LAST SUFFIX Virden				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 8307 High Oak DR Austin, TX 78759			Date Hand-delivered or Date Postmarked	
				Receipt # Amount	
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Robin				
	NICKNAME LAST SUFFIX Coopwood				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4408 Spicewood Springs RD Austin, TX 78759				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 415-6772				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" 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 01/01/2023 06/30/2023				
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE		
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2 of 17

13 C / OH NAME	Viriden, Jennifer M	14 Filer ID	(Ethics Commission Filers)
		00090501	

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

16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,905.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	5,981.40
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	949.69
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	75,500.00

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.

Jennifer M Viriden

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**

3 of 17

18 FILER NAME Virden, Jennifer M		19 Filer ID (Ethics Commission Filers) 00090501
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,905.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
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	\$ 5,981.40
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/6 Rpt: 4/17
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Firefighters Assn PAC <hr/> 6 Contributor address; City; State; Zip Code 7537 Cameron RD Austin , TX 78752	7 Amount of Contribution (\$) \$450.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Rowland <hr/> Contributor address; City; State; Zip Code 3406 Menchaca RD Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bula, Gerry <hr/> Contributor address; City; State; Zip Code 2108 Trail of Madrones Austin , TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chastain, Stephen <hr/> Contributor address; City; State; Zip Code 3501 Peregrine Falcon DR Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian, Kim <hr/> Contributor address; City; State; Zip Code 4205 Woodway DR Austin, TX 78731	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EA		Employer (See Instructions) UT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/6 Rpt: 5/17
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cocco, Catherine <hr/> 6 Contributor address; City; State; Zip Code 5609 Spurflower DR Austin , TX 78759	7 Amount of Contribution (\$) \$450.00
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) IBM
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cocco, Gerard <hr/> Contributor address; City; State; Zip Code 5609 Spurflower DR Austin , TX 78759	Amount of Contribution (\$) \$450.00
Principal occupation / Job title (See Instructions) SW Developer		Employer (See Instructions) gCocco Software
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deacutis , John A. <hr/> Contributor address; City; State; Zip Code 4807 Palisades DR Austin , TX 78731	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Nancy <hr/> Contributor address; City; State; Zip Code 3905 Sidehill Path Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gresser, Steven <hr/> Contributor address; City; State; Zip Code 5712 Barker Ridge DR Austin, TX 78759	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Medical		Employer (See Instructions) AAG

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/6 Rpt: 6/17
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hance, Trevor <hr/> 6 Contributor address; City; State; Zip Code 9407 Braeburn Glen ST Austin, TX 78729	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) State of Texas
Date 02/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Healey, Patrick <hr/> Contributor address; City; State; Zip Code 5201 Buffalo Pass Austin , TX 78745	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) COA
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inman, Bobby R. <hr/> Contributor address; City; State; Zip Code 3200 Riva Ridge RD Austin , TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnstone, James <hr/> Contributor address; City; State; Zip Code 4007 Bunny Run Austin, TX 78746	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathias, Matt <hr/> Contributor address; City; State; Zip Code 3660 Stoneridge RD Bldg E. Austin, TX 78746	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Focus Properties

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/6 Rpt: 7/17
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, James <hr/> 6 Contributor address; City; State; Zip Code 3302 Riva Ridge RD Austin, TX 78746	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Howard <hr/> Contributor address; City; State; Zip Code 1007 Walter St Austin , TX 78702	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Bradley <hr/> Contributor address; City; State; Zip Code 3571 Far West BLVD Austin, TX 78731	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pender, Jeffrey <hr/> Contributor address; City; State; Zip Code 904 West Ave Austin, TX 78701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Rebecca <hr/> Contributor address; City; State; Zip Code 3104 Stoneway DR Austin , TX 78757	Amount of Contribution (\$) \$25.00
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: 5/6 Rpt: 8/17
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rozycki, Dan <hr/> 6 Contributor address; City; State; Zip Code 6207 Nasco DR Austin, TX 78757	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Transtec
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Susan Combs <hr/> Contributor address; City; State; Zip Code 10601 Floral Park DR Austin, TX 78759	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 01/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryder, Peggy <hr/> Contributor address; City; State; Zip Code 2805 Robbs Run Austin, TX 78703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 02/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryder, Peggy <hr/> Contributor address; City; State; Zip Code 2805 Robbs Run Austin, TX 78703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryder, Peggy <hr/> Contributor address; City; State; Zip Code 2805 Robbs Run Austin, TX 78703	Amount of Contribution (\$) \$10.00
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: 6/6 Rpt: 9/17
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spoor, Jerry <hr/> 6 Contributor address; City; State; Zip Code 7904 Woodcroft DR Austin, TX 78749	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor , Yvonne <hr/> Contributor address; City; State; Zip Code 4807 Palisade DR Austin , TX 78731	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson , Meg <hr/> Contributor address; City; State; Zip Code 2005 Arthur LN Austin , TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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: 1/8 Rpt: 10/17	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/30/2023	5 Payee name Anedot, Inc.	
6 Amount (\$) \$71.70	7 Payee address; City; State; Zip Code 1340 Poydras ST Suite 1770 New Orleans, LA 70112	
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 Transaction fees in this reporting period.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/22/2023	Payee name Constant Contact	
Amount (\$) \$133.25	Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Email.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment contacts.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/22/2023	Payee name Constant Contact	
Amount (\$) \$133.25	Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Email.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment contacts.
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: 2/8 Rpt: 11/17	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/22/2023	5 Payee name Constant Contact	
6 Amount (\$) \$69.29	7 Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Email.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment contacts.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/22/2023	Candidate/Officeholder name Payee name Constant Contact	
Amount (\$) \$69.29	Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Email.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment contacts.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/22/2023	Candidate/Officeholder name Payee name Constant Contact	
Amount (\$) \$69.29	Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Email.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment contacts.
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: 3/8 Rpt: 12/17	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/22/2023	5 Payee name Constant Contact	
6 Amount (\$) \$69.29	7 Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Email.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment contacts.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/13/2023	Payee name Moonshot Marketers, LLC	
Amount (\$) \$450.00	Payee address; City; State; Zip Code 3736 Broderick St. San Francisco, CA 94123	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reconfigure website for loan repayment.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/16/2023	Payee name The UPS Store	
Amount (\$) \$192.00	Payee address; City; State; Zip Code 8127 Mesa DR Suite B206 Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Mailbox.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment correspondence.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/8 Rpt: 13/17	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/23/2023	5 Payee name Viriden, Jennifer	
6 Amount (\$) \$4,500.00	7 Payee address; City; State; Zip Code 8307 High Oak Dr. Austin , TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Partial Repayment of my loan to my campaign.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2023	Payee name Wix	
Amount (\$) \$30.31	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/20/2023	Payee name Wix	
Amount (\$) \$7.03	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/8 Rpt: 14/17	2 FILER NAME Virden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/17/2023	5 Payee name Wix	
6 Amount (\$) \$30.31	7 Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2023	Payee name Wix	
Amount (\$) \$7.03	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/17/2023	Payee name Wix	
Amount (\$) \$30.31	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/8 Rpt: 15/17	2 FILER NAME Virden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/20/2023	5 Payee name Wix	
6 Amount (\$) \$7.03	7 Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/17/2023	Payee name Wix	
Amount (\$) \$30.31	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/20/2023	Payee name Wix	
Amount (\$) \$7.03	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/8 Rpt: 16/17	2 FILER NAME Virden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/17/2023	5 Payee name Wix	
6 Amount (\$) \$30.31	7 Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/20/2023	Payee name Wix	
Amount (\$) \$7.03	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/17/2023	Payee name Wix	
Amount (\$) \$30.31	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/8 Rpt: 17/17	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/20/2023	5 Payee name Wix	
6 Amount (\$) \$7.03	7 Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For loan repayment.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held