

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2 of 16

13 C / OH NAME Guzman, Monica A.	14 Filer ID (Ethics Commission Filers) 00090757
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
	COMMITTEE ADDRESS	
	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)	\$	4,298.75
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	12,747.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	5,686.86
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	6,100.00

17 AFFIDAVIT

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.

 Monica A. Guzman
 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 Guzman, Monica A.		19 Filer ID (Ethics Commission Filers) 00090757
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,298.75
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	\$ 12,499.70
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	\$ 248.00
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: 1/8 Rpt: 4/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 01/21/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Carla <hr/> 6 Contributor address; City; State; Zip Code 1213 W 12th St Austin, TX 78703	7 Amount of Contribution (\$) \$421.37
8 Principal occupation / Job title (See Instructions) Retail		9 Employer (See Instructions) Anderson's Coffee Co
Date 01/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, James <hr/> Contributor address; City; State; Zip Code 1213 W 12th St Austin, TX 78703	Amount of Contribution (\$) \$421.37
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) Anderson's Coffee Co
Date 01/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Will <hr/> Contributor address; City; State; Zip Code 7803 Wycombe Dr Ste 230 Austin, TX 78749	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) GAVA
Date 01/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castro, Vanessa <hr/> Contributor address; City; State; Zip Code 4616 Triangle Ave Apt 4316 Austin, TX 78751	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Regional Director		Employer (See Instructions) It's Time Texas
Date 01/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman Thigpen, Journee <hr/> Contributor address; City; State; Zip Code 1917 Coats Cir Austin, TX 78748	Amount of Contribution (\$) \$199.26
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/8 Rpt: 5/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 01/20/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coopwood, Thomas <hr/> 6 Contributor address; City; State; Zip Code 6717 Valburn Dr Austin, TX 78731	7 Amount of Contribution (\$) \$105.58
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Leslie <hr/> Contributor address; City; State; Zip Code 7101 Virginia Pkwy Apt 525 McKinney, TX 75071	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Texas Workforce Commission
Date 01/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dowell, Deborah <hr/> Contributor address; City; State; Zip Code 3314 Emerald Grove Dr Kingwood, TX 77345	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Non-employed		Employer (See Instructions) Non-employed
Date 01/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garay, Ricardo <hr/> Contributor address; City; State; Zip Code 561 Bridgestone Way Buda, TX 78610	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Community Health Worker		Employer (See Instructions) University of Texas
Date 01/18/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harutunian, Anne <hr/> Contributor address; City; State; Zip Code PO Box 14487 Austin, TX 78761-4487	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Self-employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/8 Rpt: 6/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 01/20/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hise, Laura <hr/> 6 Contributor address; City; State; Zip Code 3242 Thames Ln Laurel, MD 20724	7 Amount of Contribution (\$) \$105.58
8 Principal occupation / Job title (See Instructions) IT Specialist		9 Employer (See Instructions) US Dept of Treasury
Date 01/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ice, Lauren <hr/> Contributor address; City; State; Zip Code 1710 Shelbourne Dr Austin, TX 78752	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Perales, Allmon & Ice, PC
Date 01/16/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Shane <hr/> Contributor address; City; State; Zip Code 6505 Shirley Ave Apt 303 Austin, TX 78752	Amount of Contribution (\$) \$31.89
Principal occupation / Job title (See Instructions) Organizer		Employer (See Instructions) Nonprofit
Date 01/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Mike <hr/> Contributor address; City; State; Zip Code 2603 Carnarvon Ln Austin, TX 78704-5601	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Civil Servant		Employer (See Instructions) Local government
Date 01/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Rocky <hr/> Contributor address; City; State; Zip Code 11502 Sterlinghill Dr Austin, TX 78758	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self-employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/8 Rpt: 7/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 01/18/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucio, Daniel <hr/> 6 Contributor address; City; State; Zip Code 1101 Rio Hondo Rd Harlingen, TX 78550	7 Amount of Contribution (\$) \$263.47
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Indeed
Date 01/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyon, Andy <hr/> Contributor address; City; State; Zip Code 4414 Ramsey Ave Austin, TX 78756	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Community School Coordinator		Employer (See Instructions) Austin Voices for Education and Youth
Date 01/18/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Joseph <hr/> Contributor address; City; State; Zip Code 13204 Bourbon St Austin, TX 78727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McArthur, Barbara <hr/> Contributor address; City; State; Zip Code 5700 Clay Ave Austin, TX 78756	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Astronomer		Employer (See Instructions) UT Austin
Date 01/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarter, Tasha <hr/> Contributor address; City; State; Zip Code 207 Montalcino Blvd Austin, TX 78734	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Engineering		Employer (See Instructions) RWE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/8 Rpt: 8/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 01/22/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitcham, Gail	7 Amount of Contribution (\$) \$79.26
	6 Contributor address; City; State; Zip Code 8400 Jamestown Dr Apt 428 Austin, TX 78758	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perales, Marisa	Amount of Contribution (\$) \$105.58
	Contributor address; City; State; Zip Code 2104 Willow St Austin, TX 78702	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Perales, Allmon & Ice, PC
Date 01/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reid, Cindi	Amount of Contribution (\$) \$52.95
	Contributor address; City; State; Zip Code 11228 Prairie Dove Cir Austin, TX 78758	
Principal occupation / Job title (See Instructions) Homemaker/Realtor		Employer (See Instructions) Self-employed
Date 01/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Nefertitti	Amount of Contribution (\$) \$37.16
	Contributor address; City; State; Zip Code 4700 N Capital of Texas Hwy Apt 336 Austin, TX 78746	
Principal occupation / Job title (See Instructions) Supervisor		Employer (See Instructions) City of Austin
Date 01/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Jane H	Amount of Contribution (\$) \$16.11
	Contributor address; City; State; Zip Code 1000 Glen Oaks Ct Austin, TX 78702	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/8 Rpt: 9/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 01/20/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roa, Ruby <hr/> 6 Contributor address; City; State; Zip Code 611 Terrell Hill Dr Austin, TX 78704	7 Amount of Contribution (\$) \$26.63
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) HACA
Date 01/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodríguez, Lourdes <hr/> Contributor address; City; State; Zip Code 6503 Willamette Dr Austin, TX 78723	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Sr Program Manager		Employer (See Instructions) St David's Foundation
Date 01/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rojas, Paula <hr/> Contributor address; City; State; Zip Code 3908 Hargis St Austin, TX 78723	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Midwife		Employer (See Instructions) Embody Transformation
Date 01/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saxena, Shubhada <hr/> Contributor address; City; State; Zip Code 555 E 5th St Apt 2912 Austin, TX 78701	Amount of Contribution (\$) \$106.63
Principal occupation / Job title (See Instructions) Social Work		Employer (See Instructions) Aspire to Age, PBC
Date 01/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, Robin <hr/> Contributor address; City; State; Zip Code 2609 Sherwood Ln Austin, TX 78704	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Organizer		Employer (See Instructions) TCE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/8 Rpt: 10/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 01/18/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Alfred	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code PO Box 5674 Austin, TX 78763-5674	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tovo, Kathie	Amount of Contribution (\$) \$263.47
	Contributor address; City; State; Zip Code 809 W 32nd St Austin, TX 78705	
Principal occupation / Job title (See Instructions) Council Member		Employer (See Instructions) City of Austin
Date 01/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Carl	Amount of Contribution (\$) \$421.37
	Contributor address; City; State; Zip Code 8400 Jamestown Dr Apt 426 Austin, TX 78758	
Principal occupation / Job title (See Instructions) Construction Wireman		Employer (See Instructions) International Brotherhood of Electrical Workers Loc 520
Date 01/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Judith	Amount of Contribution (\$) \$105.58
	Contributor address; City; State; Zip Code 2325 Alex Kornman Blvd Apt D Harvey, LA 70058-6451	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Minnie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 4803 Avenue H Austin, TX 78751	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/8 Rpt: 11/16
2 FILER NAME Guzman, Monica A.		3 Filer ID (Ethics Commission Filers) 00090757
4 Date 01/22/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zachary, Doug <hr/> 6 Contributor address; City; State; Zip Code 296 Old 71 Cedar Creek, TX 78612	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired

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: 1/2 Rpt: 12/16	2 FILER NAME Guzman, Monica A.	3 Filer ID (Ethics Commission Filers) 00090757
4 Date 01/30/2022	5 Payee name Allegría Catering & Fiestas	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 10307 Tildon Ave Austin, TX 78754	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food for watch party
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/23/2022	Payee name FedEx Office Print & Ship Center	
Amount (\$) \$10.06	Payee address; City; State; Zip Code 9222 Burnet Rd Ste 101 Austin, TX 78758	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing walk lists
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/23/2022	Payee name FedEx Office Print & Ship Center	
Amount (\$) \$3.24	Payee address; City; State; Zip Code 9222 Burnet Rd Ste 101 Austin, TX 78758	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense staples
Complete ONLY 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: 2/2 Rpt: 13/16	2	FILER NAME Guzman, Monica A.	3	Filer ID (Ethics Commission Filers) 00090757
4	Date 01/24/2022	5	Payee name HEB		
6	Amount (\$) \$24.30	7	Payee address; City; State; Zip Code 7015 Village Center Dr Austin, TX 78731		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense beverages for watch party		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 01/31/2022		Payee name Trudy's Hallmark Shop		
	Amount (\$) \$15.14		Payee address; City; State; Zip Code 9828 Great Hills Trl Ste 600 Austin, TX 78759		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) stationery	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense thank you cards		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 01/24/2022		Payee name Y-Strategy LLC		
	Amount (\$) \$12,346.96		Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78723		
	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, website, mail production, phone banking, lit drop, graphic design, printing, email		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 1/2 Rpt: 14/16	2 FILER NAME Guzman, Monica A.	3 Filer ID (Ethics Commission Filers) 00090757
4 Date 02/15/2022	5 Payee name USPS PO Boxes Online	
6 Amount (\$) \$62.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 8557 Research Blvd Ste 124 Austin, TX 78758	
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 Above address is for the Town North USPS station
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2022	Payee name USPS PO Boxes Online	
Amount (\$) \$62.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8557 Research Blvd Ste 124 Austin, TX 78758	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Above address is for the Town North USPS station
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/25/2022	Payee name USPS PO Boxes Online	
Amount (\$) \$62.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8557 Research Blvd Ste 124 Austin, TX 78758	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Above address is for the Town North USPS station
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/2 Rpt: 15/16	2 FILER NAME Guzman, Monica A.	3 Filer ID (Ethics Commission Filers) 00090757
4 Date 11/17/2022	5 Payee name USPS PO Boxes Online	
6 Amount (\$) \$62.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 8557 Research Blvd Ste 124 Austin, TX 78758	
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 Above address is for the Town North USPS station
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
	Candidate/Officeholder name	Office sought Office held

The Instruction Guide explains how to complete this form.

**** Complete only if "Report Type" on page 1 is marked "Final Report" ****

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1 C/OH NAME Guzman, Monica A.	2 Filer ID (Ethics Commission Filers) 00090757
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3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

 Monica A. Guzman
 Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

**** Complete A & B below only if you are not an officeholder ****

A CAMPAIGN FUNDS

Check only one:

I do not have unexpended contributions or unexpended interest or income earned from political contributions.

I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code 254.204.

B ASSETS

Check only one:

I do not retain assets purchased with political contributions or interest or other income from political contributions.

I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, 254.204.

 Monica A. Guzman
 Signature of Candidate

5 OFFICEHOLDER

**** Complete this section only if you are an officeholder ****

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

 Signature of Officeholder