

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) 00091405		2 Total pages filed: 34	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Amber K.		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/05/2026		
	NICKNAME LAST SUFFIX Goodwin				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE PO Box 14038 Austin, TX 78761			Date Hand-delivered or Date Postmarked	
				Receipt #	Amount
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Zenette				
	NICKNAME LAST SUFFIX Dorsey				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2625 Market Garden Ln. Austin, TX 78745				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 435-2203				
8 REPORT TYPE	☐ January 15 ☒ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only) ☐ July 15 ☐ 8th day before election ☐ Exceeded modified reporting limit ☐ Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/01/2026 09/24/2026				
10 ELECTION	ELECTION DATE Month Day Year 11/03/2026		ELECTION TYPE ☐ Primary ☐ Runoff ☐ Other ☒ General ☐ Special		
11 OFFICE	OFFICE HELD (if any) None		12 OFFICE SOUGHT (if known) Council Member, District 1 Place Austin District 1		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Goodwin, Amber K.	14 Filer ID (Ethics Commission Filers) 00091405
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15 NOTICE FROM POLITICAL COMMITTEE(S) ☐ 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
	☐ GENERAL	COMMITTEE ADDRESS
	☐ 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)	\$ 7,713.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 34,575.90
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 38,205.69
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. Amber K. Goodwin 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 Goodwin, Amber K.		19 Filer ID (Ethics Commission Filers) 00091405
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,713.00
2.	☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	☐ SCHEDULE E: LOANS	\$
5.	☒ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 34,186.20
6.	☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	☐ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	☒ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 389.70
10.	☐ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	☐ 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: 1/15 Rpt: 4/34
2 FILER NAME Goodwin, Amber K.		3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/04/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) AFSCME Vote PAC 6 Contributor address; City; State; Zip Code 3571 Far West Blvd. AUSTIN, TX 78741	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/01/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Adair, John S. Contributor address; City; State; Zip Code 4520 Caswell Avenue Austin, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) Computer programmer
Date 08/06/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Albert, David Contributor address; City; State; Zip Code 1101 Grove Blvd, Apt 703 Austin, TX 78741	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Austin Community College
Date 09/24/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Anderson, David Contributor address; City; State; Zip Code 1515 Oxford Ave. Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Drenner Group		Employer (See Instructions) Consultant
Date 07/16/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Baker, Chris Contributor address; City; State; Zip Code 9411 Lightwood CV Austin, TX 78748	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Fringe Consulting		Employer (See Instructions) Consultant

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/15 Rpt: 5/34
2 FILER NAME Goodwin, Amber K.		3 Filer ID (Ethics Commission Filers) 00091405
4 Date 07/04/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Beh, Eugenia 6 Contributor address; City; State; Zip Code 1711 Juniper Ridge Loop Cedar Park, TX 78613	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) MIT		9 Employer (See Instructions) Librarian
Date 08/04/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Beh, Eugenia Contributor address; City; State; Zip Code 1711 Juniper Ridge Loop Cedar Park, TX 78613	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) MIT		Employer (See Instructions) Librarian
Date 09/04/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Beh, Eugenia Contributor address; City; State; Zip Code 1711 Juniper Ridge Loop Cedar Park, TX 78613	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) MIT		Employer (See Instructions) Librarian
Date 09/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Beliveau, Emmett Contributor address; City; State; Zip Code 2205 Sunny Slope Dr Austin, TX 78703	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) C3 Presents		Employer (See Instructions) Executive
Date 09/15/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Bland, Joe Contributor address; City; State; Zip Code 5511 lands end st Austin, TX 78734	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/15 Rpt: 6/34
2 FILER NAME Goodwin, Amber K.		3 Filer ID (Ethics Commission Filers) 00091405
4 Date 07/01/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Bray, Timothy 6 Contributor address; City; State; Zip Code 4510 W Guadalupe St Apt C101 Austin, TX 78751	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) City of Austin		9 Employer (See Instructions) Policy Advisor
Date 08/28/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Calhoun, Alexander Contributor address; City; State; Zip Code 3112 Raspberry Road Austin, TX 78748	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Shmoo		Employer (See Instructions) Self
Date 09/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Castro, Roxana Contributor address; City; State; Zip Code 4612 Lyons Road Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Myself		Employer (See Instructions) Mom
Date 07/10/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Cofer, George Contributor address; City; State; Zip Code 3306 Gentry Drive Austin, TX 78746	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) consultant
Date 08/21/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Cofer, George Contributor address; City; State; Zip Code 3306 Gentry Drive Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Trails		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/15 Rpt: 7/34
2 FILER NAME Goodwin, Amber K.		3 Filer ID (Ethics Commission Filers) 00091405
4 Date 08/26/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Cole, Sheryl 6 Contributor address; City; State; Zip Code 4101 Wildwood Rd Austin, TX 78722	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) State Representative - House District 46		9 Employer (See Instructions) Texas House of Representatives
Date 09/22/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Cumberbatch, Jennifer Contributor address; City; State; Zip Code 831 East 38th Street Austin, TX 78705	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Full Measure J. Cumberbatch		Employer (See Instructions) Pastoral Counselor
Date 08/09/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Dessain, Erin Contributor address; City; State; Zip Code 7009 Burnell Dr Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Gauge Yarn		Employer (See Instructions) Retail owner
Date 07/01/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Ehresman, Katya Contributor address; City; State; Zip Code 1408 E 34th Street Austin, TX 78722	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Blue victory comms		Employer (See Instructions) Principal
Date 09/24/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Farris, Grace Contributor address; City; State; Zip Code 4013 Ridgelea Dr. Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) University of texas		Employer (See Instructions) Physician

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/15 Rpt: 8/34
2 FILER NAME Goodwin, Amber K.		3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/17/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Field, Megan 6 Contributor address; City; State; Zip Code 5901 Sarah Ct Austin, TX 78757	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/22/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Flack, Scott Contributor address; City; State; Zip Code 859 Castle Ridge Rd Austin, TX 78746	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Live Oak		Employer (See Instructions) CEO
Date 08/11/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Garcia, Mireya Contributor address; City; State; Zip Code 1803 Poquito St, Apt B Austin, TX 78702	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Texas House of Representatives		Employer (See Instructions) Policy & Communications Director
Date 09/13/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Gayle, Jackson Contributor address; City; State; Zip Code 8102 Pinto Path Austin, TX 78736	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TCDAO		Employer (See Instructions) ADA
Date 09/24/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Glazar, Jared Contributor address; City; State; Zip Code 5217 Keene Cv Austin, TX 78730	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Milestone Community Builders		Employer (See Instructions) Marketing

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/15 Rpt: 9/34
2 FILER NAME Goodwin, Amber K.		3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/24/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Golden, Nicole 6 Contributor address; City; State; Zip Code 8602 Dorotha Ct Austin, TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) Texas Gun Sense
Date 09/23/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Handal, Edgar Contributor address; City; State; Zip Code 1003 Linden St Unit A Austin, TX 78702	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Computer engineer		Employer (See Instructions) NVIDIA
Date 09/23/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Hart, Mallory Contributor address; City; State; Zip Code 6706 Tulane Drive Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insight Advanced Planning		Employer (See Instructions) Operations Director
Date 07/01/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Hoang, Kim Ngan Contributor address; City; State; Zip Code 8204 McKamy Dr Austin, TX 78744	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Ngansequitur LLC		Employer (See Instructions) Artist + Designer
Date 07/01/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Hodge, Viana Contributor address; City; State; Zip Code 1413 Byers Lane Austin, TX 78753	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Texas Medical Board		Employer (See Instructions) Attorney

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/15 Rpt: 10/34
2 FILER NAME Goodwin, Amber K.		3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/24/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Holst, Mackenzie 6 Contributor address; City; State; Zip Code 8410 Millway Dr Austin, TX 78757	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Associate Attorney		9 Employer (See Instructions) Deyerle Silva Smith, PLLC
Date 08/28/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jones, Rickey Contributor address; City; State; Zip Code 600 west 10th. Apt 443 Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Travis county
Date 09/22/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jordan, Frances Contributor address; City; State; Zip Code 1510 West North Loop Boulevard, #813 Austin, TX 78756	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) AECOM		Employer (See Instructions) Consultation
Date 08/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Kimbrough, Tychanika Contributor address; City; State; Zip Code 7106 Terrazzo Cottage Austin, TX 78744	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Kimbrough Family Law		Employer (See Instructions) Lawyer
Date 09/24/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Leffler, Benjamin Contributor address; City; State; Zip Code 3509 Werner Ave Austin, TX 78722	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Chief of Staff		Employer (See Instructions) City of Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/15 Rpt: 11/34
2 FILER NAME Goodwin, Amber K.		3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/17/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Metcal, Steve 6 Contributor address; City; State; Zip Code 700 Oakland Ave Austin, TX 78703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Metcalfe Wolff Stuart & Williams, LLP		9 Employer (See Instructions) Attorney
Date 09/04/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Musselman, KT Contributor address; City; State; Zip Code 14900 Avery Ranch Blvd, Suite C 200, PMB 71 Austin, TX 78717	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Williamson County		Employer (See Instructions) Justice of the Peace
Date 09/12/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Natsheh, Hatem Contributor address; City; State; Zip Code 6504 Mitra dr Austin, TX 78739	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Kwik mart		Employer (See Instructions) Self employed
Date 09/13/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Navarro, Alice Contributor address; City; State; Zip Code 4825 Davis Lane, #422 Austin, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Travis County		Employer (See Instructions) Social Worker
Date 07/06/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Nelson, Brandi Contributor address; City; State; Zip Code 1400 Marcus Pl, Unit A Austin, TX 78721	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Office of Capital and forensic writs		Employer (See Instructions) Ea

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/15 Rpt: 12/34
2 FILER NAME Goodwin, Amber K.		3 Filer ID (Ethics Commission Filers) 00091405
4 Date 08/06/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Nelson, Brandi 6 Contributor address; City; State; Zip Code 1400 Marcus Pl, Unit A Austin, TX 78721	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Office of Capital and forensic writs		9 Employer (See Instructions) Ea
Date 09/06/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Nelson, Brandi Contributor address; City; State; Zip Code 1400 Marcus Pl, Unit A Austin, TX 78721	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Office of Capital and forensic writs		Employer (See Instructions) Ea
Date 09/23/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Neslund, Melissa Contributor address; City; State; Zip Code 7600 Journeyville Drive Austin, TX 78735	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Stratus Properties		Employer (See Instructions) Development Manager
Date 09/24/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Ortiz, Lilly A Contributor address; City; State; Zip Code 4807 Quicksilver Blvd Austin, TX 78744	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Actress/Small business owner		Employer (See Instructions) Self employed
Date 09/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Ortiz, Lilly Ann Contributor address; City; State; Zip Code 9003 Hunters Trace Austin, TX 78758	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Actress

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/15 Rpt: 13/34
2 FILER NAME Goodwin, Amber K.		3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/24/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Ouzillou, Yael 6 Contributor address; City; State; Zip Code 3503 Winfield Drive Austin, TX 78704	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Y'alla Collaborative
Date 09/18/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Poteet, Brian Contributor address; City; State; Zip Code 405 W North Loop Blvd #1 Austin, TX 78751	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Cutsforth, Inc.
Date 08/31/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Qadri, Zohaib Contributor address; City; State; Zip Code 2908 Moreno St. Austin, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) City of Austin		Employer (See Instructions) Council Member
Date 09/24/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Robinson, Shuronda Contributor address; City; State; Zip Code 1706 Overhill Dr Austin, TX 78721	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Public Relations		Employer (See Instructions) Self
Date 09/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) SALAS-PORRAS, ANA LUISA Contributor address; City; State; Zip Code 4507 Shoal Creek Blvd Austin, TX 78756	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/15 Rpt: 14/34
2 FILER NAME Goodwin, Amber K.		3 Filer ID (Ethics Commission Filers) 00091405
4 Date 07/25/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Schoenfield, Miriam 6 Contributor address; City; State; Zip Code 1505 Concordia Avenue Austin, TX 78722	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) UT Austin		9 Employer (See Instructions) Professor
Date 08/27/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Schoenfield, Miriam Contributor address; City; State; Zip Code 1505 Concordia Avenue Austin, TX 78722	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) UT Austin		Employer (See Instructions) Professor
Date 08/25/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Selinger, Claire Contributor address; City; State; Zip Code 5103 Backtrail Drive Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) UT
Date 09/15/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Sethi, Pooja Contributor address; City; State; Zip Code 4321 House of York Austin, TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Sethi, Pooja Contributor address; City; State; Zip Code 4321 House of York Austin, TX 78730	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/15 Rpt: 15/34
2 FILER NAME Goodwin, Amber K.		3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/24/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Simon, Kayla 6 Contributor address; City; State; Zip Code 1909 Alexander Ave Austin, TX 78722	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Policy Advisor		9 Employer (See Instructions) City of Austin
Date 09/11/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Simons, Cynthia Contributor address; City; State; Zip Code 2001 Kass Cove Roundrock, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Travis County		Employer (See Instructions) Planning Manager
Date 09/22/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Stern, Lonny Contributor address; City; State; Zip Code 4361 South Congress Avenue Austin, TX 78745	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Government Relations		Employer (See Instructions) Lime
Date 07/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Strassburger, Trudy Contributor address; City; State; Zip Code 4917 strass Drive Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Travis county		Employer (See Instructions) Attorney
Date 08/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Strassburger, Trudy Contributor address; City; State; Zip Code 4917 strass Drive Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Travis county		Employer (See Instructions) Attorney

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/15 Rpt: 16/34
2 FILER NAME Goodwin, Amber K.		3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/17/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Strassburger, Trudy 6 Contributor address; City; State; Zip Code 4917 strass Drive Austin, TX 78731	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Travis county		9 Employer (See Instructions) Attorney
Date 08/02/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Sturley, Jennifer Contributor address; City; State; Zip Code 6701 Bryn Mawr Drive Austin, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) UT Austin		Employer (See Instructions) PhD student
Date 09/23/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Trimble, Mike Contributor address; City; State; Zip Code 3403 B Neal Street Austin, TX 78702	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) City of Austin		Employer (See Instructions) Administrator
Date 08/31/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Trust, Ashley Contributor address; City; State; Zip Code 4508 Colorado Crossing Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Central Health		Employer (See Instructions) Physician
Date 07/01/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Vasquez, Skip Contributor address; City; State; Zip Code 4600 Elmont Dr. #1812 Austin, TX 78741	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) consultant		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: 14/15 Rpt: 17/34
2 FILER NAME Goodwin, Amber K.		3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/17/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Vasquez, Yolanda 6 Contributor address; City; State; Zip Code 2305 Airport Drive Leander, TX 78641	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/24/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Vickers, Andrew Contributor address; City; State; Zip Code 303 Colorado Street Austin, TX 78701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DuBois Bryant & Campbell		Employer (See Instructions) Attorney
Date 09/24/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Walker, Heyden Contributor address; City; State; Zip Code 4909 Camacho St. Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Urban Planner		Employer (See Instructions) Black + Motal
Date 09/24/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Welch, Parker Contributor address; City; State; Zip Code 4424 Jackson Ave Apt 492 Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) City of Austin
Date 09/10/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Whitfield, Hilary Contributor address; City; State; Zip Code 1504 Norris Dr Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/15 Rpt: 18/34
2 FILER NAME Goodwin, Amber K.		3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/24/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Williams, Sidney 6 Contributor address; City; State; Zip Code 1508 Dessau Ridge Ln, Ste. 503 Austin, TX 78754	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Williams Law		9 Employer (See Instructions) Atty
Date 09/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Wolff, David Contributor address; City; State; Zip Code 1206 West 8th Street Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) MWSW		Employer (See Instructions) Attorney

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: 1/15 Rpt: 19/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/09/2026	5 Payee name 2002 Manor LLC	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 2113 Manor Rd. Austin, TX 78722	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Space rental
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/10/2026	Payee name 7-Eleven	
Amount (\$) \$7.99	Payee address; City; State; Zip Code 2020 E. 7th St, Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Ice
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2026	Payee name 7-Eleven	
Amount (\$) \$6.47	Payee address; City; State; Zip Code 2020 E. 7th St, Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Ice for event
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: 2/15 Rpt: 20/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/17/2026	5 Payee name 7-Eleven	
6 Amount (\$) \$6.47	7 Payee address; City; State; Zip Code 2020 E. 7th St, Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Ice for event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/24/2026	Payee name AFL-CIO	
Amount (\$) \$365.00	Payee address; City; State; Zip Code 1106 Lavaca St. Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Print Ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/24/2026	Payee name AFL-CIO	
Amount (\$) \$40.00	Payee address; City; State; Zip Code 1106 Lavaca St. Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Fish Fry tickets
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: 3/15 Rpt: 21/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/24/2026	5 Payee name ActBlue	
6 Amount (\$) \$81.22	7 Payee address; City; State; Zip Code 366 Summer St. Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Fundraising Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/10/2026	Payee name Ali, Hashir	
Amount (\$) \$756.00	Payee address; City; State; Zip Code 12166 Metric Blvd. Austin, TX 78758	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Wages
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/10/2026	Payee name Ali, Hashir	
Amount (\$) \$1,965.60	Payee address; City; State; Zip Code 12166 Metric Blvd. Austin, TX 78758	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Wages
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: 4/15 Rpt: 22/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 08/18/2026	5 Payee name Chow Chow LLC	
6 Amount (\$) \$110.00	7 Payee address; City; State; Zip Code 2002 Manor Rd Austin, TX 78722	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Event supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/13/2026	Payee name City of Austin	
Amount (\$) \$508.00	Payee address; City; State; Zip Code 301 W. 2nd Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Filing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/24/2026	Payee name Donateway	
Amount (\$) \$1,242.73	Payee address; City; State; Zip Code PO Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Fundraising Fees
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: 5/15 Rpt: 23/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 08/14/2026	5 Payee name East Side Pies	
6 Amount (\$) \$55.83	7 Payee address; City; State; Zip Code 1401 Rosewood Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Food for event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/17/2026	Payee name HEB	
Amount (\$) \$4.31	Payee address; City; State; Zip Code 7112 Ed Bluestein Blvd. Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Beverages
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/12/2026	Payee name HEB	
Amount (\$) \$3.25	Payee address; City; State; Zip Code 7112 Ed Bluestein Blvd. Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Beverages
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: 6/15 Rpt: 24/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/02/2026	5 Payee name HEB	
6 Amount (\$) \$15.83	7 Payee address; City; State; Zip Code 7112 Ed Bluestein Blvd. Austin, TX 78723	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Beverages for event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2026	Payee name Harland Clarke	
Amount (\$) \$49.50	Payee address; City; State; Zip Code 15955 La Cantera Parkway San Antonio, TX 78256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Paper Checks
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/13/2026	Payee name Hernandez Wick Campaigns LLC	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 11002 Point Clear Ct. Austin, TX 78747	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Consulting
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: 7/15 Rpt: 25/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 07/13/2026	5 Payee name Hernandez Wick Campaigns LLC	
6 Amount (\$) \$4,335.91	7 Payee address; City; State; Zip Code 11002 Point Clear Ct. Austin, TX 78747	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Doorhangars
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/05/2026	Candidate/Officeholder name Office sought Office held	
Payee name Hernandez Wick Campaigns LLC		
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 11002 Point Clear Ct. Austin, TX 78747	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense July retainer
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/05/2026	Candidate/Officeholder name Office sought Office held	
Payee name Hernandez Wick Campaigns LLC		
Amount (\$) \$195.61	Payee address; City; State; Zip Code 11002 Point Clear Ct. Austin, TX 78747	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Marketing materials
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: 8/15 Rpt: 26/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/17/2026	5 Payee name Home Depot	
6 Amount (\$) \$37.80	7 Payee address; City; State; Zip Code 3600 S IH 35 Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Field supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/05/2026	Payee name Liberal Austin Democrats	
Amount (\$) \$50.00	Payee address; City; State; Zip Code PO Box 49712 Austin, TX 78765	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Tickets to event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/10/2026	Payee name Medina, Israel	
Amount (\$) \$2,038.50	Payee address; City; State; Zip Code 704 Kennedy Ave. McAllen, TX 78501	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Wages
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: 9/15 Rpt: 27/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/10/2026	5 Payee name Medina, Israel	
6 Amount (\$) \$2,052.00	7 Payee address; City; State; Zip Code 704 Kennedy Ave. McAllen, TX 78501	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Wages
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/17/2026	Payee name Moonlight Graphix	
Amount (\$) \$119.08	Payee address; City; State; Zip Code PO Box 491 Buda, TX 78610	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Pushcards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/11/2026	Payee name Moonlight Graphix	
Amount (\$) \$67.12	Payee address; City; State; Zip Code PO Box 491 Buda, TX 78610	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Pushcards
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: 10/15 Rpt: 28/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/04/2026	5 Payee name Next Insurance	
6 Amount (\$) \$38.91	7 Payee address; City; State; Zip Code 975 California Ave. Palo Alto, CA 94304	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Liability Insurance
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2026	Payee name Next Insurance	
Amount (\$) \$38.91	Payee address; City; State; Zip Code 975 California Ave. Palo Alto, CA 94304	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Liability Insurance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/10/2026	Payee name Office Depot	
Amount (\$) \$48.68	Payee address; City; State; Zip Code 816 Tirado St. Austin, TX 78752	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Event supplies
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: 11/15 Rpt: 29/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 08/26/2026	5 Payee name Office Depot	
6 Amount (\$) \$7.57	7 Payee address; City; State; Zip Code 816 Tirado St. Austin, TX 78752	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Event supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/10/2026	Payee name Party City	
Amount (\$) \$40.01	Payee address; City; State; Zip Code 5601 Brodie Ln. Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Event supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/07/2026	Payee name Patton, Sherwynn	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 2005 E. 9th St Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Space rental
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: 12/15 Rpt: 30/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/09/2026	5 Payee name Patton, Sherwynn	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 2005 E. 9th St Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Space rental
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2026	Payee name Roppolos Pizza	
Amount (\$) \$42.88	Payee address; City; State; Zip Code 2604 Guadalupe Austin, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Food for event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/02/2026	Payee name Target	
Amount (\$) \$75.98	Payee address; City; State; Zip Code 5621 N. IH 35 Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Paper plates and supplies for event
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: 13/15 Rpt: 31/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 08/31/2026	5 Payee name Texaco	
6 Amount (\$) \$11.90	7 Payee address; City; State; Zip Code 4925 Craigwood Dr. Austin, TX 78725	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Beverages for event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2026	Payee name UPS	
Amount (\$) \$20.82	Payee address; City; State; Zip Code 1920 E. Riverside Austin, TX 78741	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Printing of fliers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/02/2026	Payee name UPS	
Amount (\$) \$13.99	Payee address; City; State; Zip Code 1920 E. Riverside Austin, TX 78741	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Printing of fliers
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: 14/15 Rpt: 32/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 07/13/2026	5 Payee name Vasquez, Alberto	
6 Amount (\$) \$6,000.00	7 Payee address; City; State; Zip Code 4600 Elmont Dr. Austin, TX 78741	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense June retainer
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2026	Payee name Vasquez, Alberto	
Amount (\$) \$6,000.00	Payee address; City; State; Zip Code 4600 Elmont Dr. Austin, TX 78741	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense August retainer
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2026	Payee name Walmart	
Amount (\$) \$26.33	Payee address; City; State; Zip Code 5017 US-290 Austin, TX 78735	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Supplies for event
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: 15/15 Rpt: 33/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/08/2026	5 Payee name Wells Fargo	
6 Amount (\$) \$6.00	7 Payee address; City; State; Zip Code 2326 S Congress Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Temporary Check Fee
9 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: 1/1 Rpt: 34/34	2 FILER NAME Goodwin, Amber K.	3 Filer ID (Ethics Commission Filers) 00091405
4 Date 09/24/2026	5 Payee name Moonlight Graphix	
6 Amount (\$) \$389.70 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 491 Buda, TX 78610	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign t-shirts
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held