### CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1. Filer ID (Ethics Com	mission Filers) 2	2. Total pages filed: 70		OFFICE US	EONLY	
	MS/MRS/MR	FIRST	MI	Date Received		
3 CANDIDATE/			IVII			
OFFICEHOLDER NAME	Mrs	Natalie			00T	
	NICKNAME	LAST	SUFFIX		$\frac{3}{1}$	RECI
		Gauldin				
4 ORIGINAL	January 15	Runoff	Other (specify)	Date Hand-delivered or	Date Postma	rkeit C
REPORT TYPE	July 15	Exceeded \$500 limit	0	_	ے	_
	✓ 30th day before election	15th day after treasur appointment (officeho		Receipt #	Ē	
	8th day before election	Final report			ى س	
				Date-Hand-delivered	Amount	
5 ORIGINAL	Month Day Year	Monti	h Day Year	Date Processed		
PERIOD COVERED	07/01/2016	THROUGH	09/29/2016	Date Imaged		
COVERED						
6 EXPLANATION O	F CORRECTION					
Original report failed to	o report \$50 monetary contributi	ion from Betty Trent, \$50 me	onetary contribution from	n Jeff Barger, and \$80.	93 in kind	
7 AFFIDAVIT		swear, or affirm, under pe	nalty of perjury, that th	is corrected report i	s	
		ue and correct. Check ONLY if applicab				
	L. L					
	RON MENDONSA Public, State of Texas	made in good fa	orts: I swear, or affirm aith and without an inte e information containe	ent to mislead or to	oort was	
	n. Expires 10-17-2020 lary ID 130864108	report not later t that the report a	swear, or affirm, that I than the 14th business is originally filed is inac inv error or omission in	day after the date I courate or incomplet	learned e. I swear	,
		M.	H. I.I ET		, mea	
			nature of Candidate	ar Officebolder		
	0(1	-				
Sworn to and subscri	ibed before me by $Na^{\frac{1}{2}}$	alle Gauldi	∽this the	1 Oct. 2.	016	
to certify v	which, witness my hand ar	id seal of office.				
am	Muhmon A	aron Mena	lonsa			
Signature of officer adr	ministering oath Printed	name of officer administeri	ng oath Title of o	officer administering o	ath	
						_
		Any Part Of The Campai To Report And Explain C		orm		

### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction	a Guide explains how to	o complete this form.	1. Filer ID (Ethics Commiss	sion Filers)	2. Total pages 70	i filed:
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR Mrs NICKNAME	FIRST Natalie LAST	·	MI SUFFIX	OFFICE L	JSE ONLY
		Gauldin				
4 CANDIDATE/ OFFICEHOLDER ADDRESS	ADDRESS /PO BOX: 3616 Far West Blvd. # 117-585	APT/SUITE # CITY Austin	STATE: TX	ZIP CODE 78731	Date Hand-delivered	or Date Postmarked
Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PH (512) 710-	ONE NUMBER 5817	EXTENSION	N	Receipt #	Amount \$
6 CAMPAIGN	MS/MRS/MR	FIRST		MI	Date Processed	
TREASURER NAME	NICKNAME	Audrey LAST		SUFFIX	Date Imaged	
		Baxter				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS: 7304 Valbum Dr	APT/SUITE #	CITY Austin	STATE: TX	ŽIP CODE 78731	
8 CAMPAIGN TREASURER PHONE	AREA CODE (512) 418-	PHONE NUMBER 0239	EXTENSION	N		
9 REPORT TYPE	January 15	30th day before election	=	noff æeded \$500 limil		er campaign tresurer : (officeholder only) (Attach- COH-FR)
10 PERIOD COVERED	Month Day 07/01/2016	/ear THI	ROUGH	Month	Day Yea 09/29/2016	r
11 ELECTION	ELECTION DATE Month Day 11/08/2016	Year ELECTION Primar Genera	γ <u></u> Γ	Runoff 🗌 ( Special	Other	
12 OFFICE	OFFICE HELD (if any)		1:	3 OFFICE SOUGH District 7	iT (if known)	
Forms provided by Texas I	Ethics Commission	GO TO PA				Revised 9/8/2015

### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 2

14 C/OH NAME	Mrs Natalie Gauldin		15 Filer ID (Ethics Commission Filers)				
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANDIDATE / OF	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT, CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
	COMMITTEE TYPE						
	GENERAL						
		COMMITTEE ADDRESS					
			· - ·				
		COMMITTEE CAMPAIGN TREASURER NAME					
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS					
17 CONTRIBUTION TOTALS		CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$0.00				
	2 TOTAL POLITICAL (OTHER THAN PLE	CONTRIBUTIONS IDGES, LOANS, OR GUARANTEES OF LOANS)	\$21,465.98				
EXPENDITURE TOTALS	3 TOTAL POLITICAL	EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$0.00				
	4 TOTAL POLITICAL	EXPENDITURES	\$32,760.64				
CONTRIBUTION BALANCE	5 TOTAL POLITICAL OF REPORTING PE	CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY ERIOD	\$7,884.57				
OUTSTANDING LOAN TOTALS	6 TOTAL PRINCIPAL LAST DAY OF THE	AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD	\$218.27				
18 AFFIDAVIT		I swear, or affirm, under penalty of penalty of penalty of penalty of penalty of penalty and correct and includes all in me under Title 15, Election Code.	erjury, that the accompanying report formation required to be reported by				
AFFIX NOTARY S	STAMP / SEAL ABOVE	Signature of Cand	idate or Officeholder				
Sworn to and subsci	ribed before me, by the said	d	this the				
day of	20	to certify which, witness my hand and seal of office.					
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath							
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us	Revised 9/8/2015				

# SUBTOTALS - COH

### FORM C/OH COVER SHEET PG 3

	FILER NAME Mrs Natalie Gauldin	20. FILER ID (Ethic	s Commission Filers)
	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTALS AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$20,745.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$720.98
З.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$0.00
4.	SCHEDULE E: LOANS		\$218.27
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRI	IBUTIONS	\$32,430.64
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$330.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONT	TRIBUTIONS	\$0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BU	ISINESS OF C/OH	\$0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CON	TRIBUTIONS	\$0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS TO FILER	RETURNED	\$0.00

SCHEDULE A1

The	Instruction Guide explains how	to complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie (				3. Filer ID (Ethics Commission Fil	lers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/07/2016	Dennis Abbott				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	12400 Cassady Dr Austin, TX 78	3727-5349			
8. Principal oc	cupation / Job title (See Instruction	าร)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/01/2016	Meredith Alderson	_			\$5.00
	6. Contributor address;	City; State;	ZIP Code		•••••
	4701 Fairview Dr Austin, TX 78	731-5314			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/05/2016	Brett Allen				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	2503 Willow St Austin, TX 7870	)2-5629			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	<b>i</b>	7. Amount of contribution (\$)	
07/17/2016	Robert Anderson				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	2020 S Congress Ave 1117 Aust	in, TX 78704-8921			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/12/2016	AUSTIN APT ASSOC PAC CO	MMITTEE			\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	4107 Medical Pkwy Ste 100 Aus	stin, TX 78756-3736			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	

SCHEDULE A1

The	Instruction Guide explains how	to complete this fo	rm.	1. Total pages Schedule A1: not available	·····
2. FILER NAM Mrs Natalie (				3. Filer ID (Ethics Commission F	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/11/2016	Jeff Barger				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	2822A Wooldridge Dr Austin, T	X 78703-1956			
8. Principal oc	cupation / Job title (See Instruction	าร)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	<b>i</b>	7. Amount of contribution (\$)	
07/01/2016	Robin Barker	_			\$10.00
	6. Contributor address;	City; State;	ZIP Code		
	2907 Vallarta Ln Austin, TX 787	733-1059			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/16/2016	John Barksdale				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	2801 French Pl Austin, TX 7872	2-2325			
8. Principal oc Real Estat	cupation / Job title (See Instruction e Broker	ns)		yer (See Instructions) CBRE	· ·
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Laura Barnes				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	710 Vanguard St Lakeway, TX 7	8734-4449			
8. Principal oc Teacher	cupation / Job title (See Instruction	าร)	· ·	yer (See Instructions) Bowie High School	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Robert Barnes				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	710 Vanguard St Lakeway, TX 7	8734-4449			
1 .	cupation / Job title (See Instruction	าร)		yer (See Instructions)	
Banker			1 1	BC Bank - Austin	

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

-

SCHEDULE A1

The Ir	nstruction Guide explains how	to complete this fo	erm.	1. Total pages Schedule A1: not available	
2. FILER NAME Mrs Natalie G	-			3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/03/2016	Mateo Barnstone				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	3917 Threadgill St Austin, TX 7	8723-4506			
8. Principal occi	upation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Grant Barrett	_			\$50.00
	6. Contributor address;	City; State;	ZIP Code		\$50.00
	3201 Whitepine Dr Austin, TX 7	8757-1651			
8. Principal occu	upation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/10/2016	Dorothy Baxter				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	7444 Wiley Ln Frisco, TX 75034	-6576	Y		
	upation / Job title (See Instructior ofessional Counelor	is)		yer (See Instructions) rivate Practice	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/27/2016	Kinan Beck				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	5017 W Park Dr Ste 200 Austin,	TX 78731-5023			
8. Principal occu	upation / Job title (See Instruction	is)	9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	<b>-</b> · ,
09/22/2016	Chris and Suzanne Blackburn				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	4303 Greystone Dr Austin, TX 7	8731-1201			
8. Principal occu	pation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	

SCHEDULE A1

The	Instruction Guide explains how	to complete this for	rm.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie (				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Bill Blaine				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	10306 Morado Cv Apt 221 Austi	n, TX 78759-5652			
8. Principal oc	cupation / Job title (See Instruction	าร)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/28/2016	Brenda Blair	_			\$100.00
	6. Contributor address;	City; State;	ZIP Code		*
	1704 Amber Ridge Dr College S	tation, TX 77845-5533			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/01/2016	Roger Borgelt				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	3608 Windsor Rd Austin, TX 78	703-1509			
8. Principal oce attorney	cupation / Job title (See Instruction	ns)		yer (See Instructions) elf	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/28/2016	Matthew Boyda				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	1306 Bonham Ter Austin, TX 78	704-2607			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	J	7. Amount of contribution (\$)	
09/28/2016	Chris Bradford				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	2620 Kinney Oaks Ct Austin, TX	K 78704-4974			
8. Principal oc	cupation / Job title (See Instruction	าร)	9 Emplo	yer (See Instructions)	
o. Principal oc	cupation / Job title (See Instruction	15)	9 Emplo	yer (See instructions)	

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Forms provided by Texas Ethics Commission

SCHEDULE A1

The i	nstruction Guide explains how to complete this form.	1. Total pages Schedule A1: not available
2. FILER NAMI Mrs Natalie C	-	3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
08/03/2016	Amy Bresnen	\$250.00
	6. Contributor address; City; State; ZI	ZIP Code
	1801 Lavaca St Apt 13L Austin, TX 78701-1325	
-		9 Employer (See Instructions)
Consultant		BresnenAssociates
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
09/26/2016	Susan Brotman	\$50.00
	6. Contributor address; City; State; ZI	ZIP Code
	9500 Ramblewood Dr Austin, TX 78748-5915	
8. Principal occ	cupation / Job title (See Instructions)	9 Employer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
09/29/2016	Cory Brown	\$25.00
	6. Contributor address; City; State; ZI	ZIP Code
	400 5th St Brooklyn, NY 11215-7429	
8. Principal occ	cupation / Job title (See Instructions)	9 Employer (See Instructions)
4. Date	5. Full name of contributorout-or-state PAC	7. Amount of contribution (\$)
07/30/2016	Skylar Buffington	\$5.00
	6. Contributor address; City; State; ZI	ZIP Code
	1044 CamiN La Costa Apt 3132 Austin, TX 78752	
8. Principal occ	cupation / Job title (See Instructions)	9 Employer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
08/27/2016	Skylar Buffington	\$5.00
	6. Contributor address; City; State; Zi	ZIP Code
	1044 CamiN La Costa Apt 3132 Austin, TX 78752	
8. Principal oco	cupation / Job title (See Instructions)	9 Employer (See Instructions)
1		

SCHEDULE A1

The	Instruction Guide explains how	to complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie (				3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/11/2016	Gwen Burkett				\$350.00
	6. Contributor address;	City; State;	ZIP Code		•
	3423 Palm Dr Mesquite, TX 751	50-3430			
8. Principal oc Retired	cupation / Job title (See Instruction	าร)		yer (See Instructions) ctircd	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/28/2016	Lara Burns				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	801 W 5th St Ste 100 Austin, TX	78703-5405			
8. Principal oc COO	cupation / Job title (See Instruction	าร)		ver (See Instructions) rbanspace	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/17/2016	Andy Cantu				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	601 Long Bow Ln Austin, TX 78	704-5632			
8. Principal oco Policy Ana	cupation / Job title (See Instruction alyst	ns)	· · ·	yer (See Instructions) ustin Chamber of Commerce	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/15/2016	Scott Carr				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	1105 Chatelaine Cv Austin, TX 7	78746-6893			
8. Principal oci	cupation / Job title (See Instruction	ns)	9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Guillermo Carrillo				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	11710 Broad Oaks Dr Austin, TX	K 78759-3758			
8. Principal occ	cupation / Job title (See Instruction	IS)	9 Employ	ver (See Instructions)	

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A1: not available	
2. FILER NAME Mrs Natalie G				3. Filer ID (Ethics Commission Fil	ers)
4 Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Jill Carvalho				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
,	4107 Peck Ave Austin, TX 7875	1-4320			
8. Principal occ	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/28/2016	Emily Cash				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	5806 Bull Creek Rd Austin, TX	78756-1014			
8. Principal occ	cupation / Job title (See Instruction	าร)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	I	7. Amount of contribution (\$)	
09/22/2016	Brian Cassidy				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	600 Congress Ave Ste 2200 Aust	tin, TX 78701-3055			
8. Principal occ Attorney	cupation / Job title (See Instruction	ns)		vyer (See Instructions) Locke Lord LLP	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/30/2016	Katherine Celik				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	9500 Jollyville Rd Apt 105 Aust	in, TX 78759-6523			
8. Principal occ	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/30/2016	Katherine Celik				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	9500 Jollyville Rd Apt 105 Aust	in, TX 78759-6523			
8. Principal occ	cupation / Job title (See Instruction	ns)	9 Emplo	over (See Instructions)	
	-				

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Forms provided by Texas Ethics Commission

# SCHEDULE A1

The	Instruction Guide explains how	to complete this for		1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie (				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	<u> </u>
09/26/2016	Joe Celko				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	4301 Kilgore Ln Austin, TX 787	27-5951			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/15/2016	Michael Chaney				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	105 W Caddo St Austin, TX 787	53-2601			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	·	7. Amount of contribution (\$)	
09/27/2016	Ronald Cheng				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	3407 Greystone Dr Austin, TX 7	8731-2343			
8. Principal oc Resteraun	cupation / Job title (See Instruction teur	ns)	· · ·	yer (See Instructions) elf Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/27/2016	Andrew Clements				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	4528 Ruiz St Austin, TX 78723-	3331			
8. Principal oc	ccupation / Job title (See Instructio	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/15/2016	Jeffrey Coddington				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	PO Box 5002 Austin, TX 78763	-5002			
8. Principal oc Consultar	cupation / Job title (See Instructio	ns)	· · ·	yer (See Instructions) LL	

SCHEDULE A1

The I	nstruction Guide explains how	to complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAMI Mrs Natalie G				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/16/2016	Aan Coleman				\$200.00
	6. Contributor address;	City; State;	ZIP Code		
	9890 Silver Mountain Dr Austin,	TX 78737-3103			
8. Principal occ Landscape	cupation / Job title (See Instruction Architect	าร)	-	yer (See Instructions) oleman & Associates	
4. Date	5. Full name of contributor	out-of-state PAC	I	7. Amount of contribution (\$)	
09/29/2016	Heather Cooke				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	512 E Riverside Dr Ste 200 Aust	in, TX 78704-1306			
8. Principal occ	cupation / Job title (See Instruction	าร)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/16/2016	Michael Cooper				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	1910 Bremen St Austin, TX 7870	03-2910			
8. Principal occ	cupation / Job title (See Instruction	ร)	9 Emplo	yer (See Instructions)	<u> </u>
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/17/2016	Rachel Coulter				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	507 Honeycomb Rdg Austin, TX	78746-5326			
8. Principal occ	cupation / Job title (See Instruction	าร)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/26/2016	Rachel Coulter				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	507 Honeycomb Rdg Austin, TX	78746-5326			
8. Principal occ	cupation / Job title (See Instruction	าร)	9 Emplo	yer (See Instructions)	

SCHEDULE A1

The li	nstruction Guide explains how	to complete this fo	orm.	1. Total pages Schedule A1: not available	
2. FILER NAME Mrs Natalic G				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/07/2016	Төтту Сох				<b>\$2</b> 0.00
	6. Contributor address;	City; State;	ZIP Code		
	5508 Avenue F Austin, TX 7875	1-1313			
8. Principal occ	upation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	<b>I</b> ;	7. Amount of contribution (\$)	
08/07/2016	Amanda Cribbs				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	4202 Flagstaff Dr Austin, TX 78	759-5025			
8. Principal occ Realtor	upation / Job title (See Instruction	าร)		yer (See Instructions) elf employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/25/2016	Amanda Cribbs				\$300.00
	6. Contributor address;	City; State;	ZIP Code		
	4202 Flagstaff Dr Austin, TX 78	759-5025			
8. Principal occ Realtor	upation / Job title (See Instruction	าร)	-	yer (See Instructions) elf employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/22/2016	Ashley De jong				\$200.00
	6. Contributor address;	City; State;	ZIP Code		
	105 Reveille Rd West Lake Hills	s, TX 78746-5333			
1 1	upation / Job title (See Instruction Casa ATX	ns)	-	yer (See Instructions) elf	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	-
09/27/2016	Courtney DeGinder				\$325.00
	6. Contributor address;	City; State;	ZIP Code		
	900 Cavalier Ln Austin, TX 787	57-1518			
· ·	upation / Job title (See Instruction	ns)		yer (See Instructions)	
Nurse			2	SCA	

SCHEDULE A1

The	Instruction Guide explains how	to complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie				3. Filer ID (Ethics Commission Fil	ers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/23/2016	Rodrigo DeJuana				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	12515 Enchanted Forest Dr Aust	in, TX 78727-5805			
8. Principal oc	ccupation / Job title (See Instruction	IS)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/27/2016	Anne Desloge				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	4300 Avenue D Austin, TX 7875	1-3713			
8. Principal oc	ccupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/01/2016	Aspen Dunaway				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	1411 West Ave Ste 100 Austin,	FX 78701-1537			
8. Principal oc	ccupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/28/2016	Marshall Escamilla				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	4803 Everglade Dr Austin, TX 7	8745-1716			
8. Principal oc	ccupation / Job title (See Instruction	าร)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/22/2016	Chris Ewen				\$30.00
	6. Contributor address;	City; State;	ZIP Code		
	222 West Ave Unit 1406 Austin,	TX 78701-0026			
8. Principal oc	ccupation / Job title (See Instruction	าร)	9 Emplo	yer (See Instructions)	

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

.

Forms provided by Texas Ethics Commission

SCHEDULE A1

The	Instruction Guide explains how	to complete this for		1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/12/2016	Russ Fallon				\$10.00
	6. Contributor address;	City; State;	ZIP Code		
	7612 W. Hyw 71 Austin, TX 787	735			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	l	7. Amount of contribution (\$)	
07/31/2016	Brandon Farmahini	_			\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	1620 E Riverside Dr Apt 3071 A	ustin, TX 78741-1023			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/15/2016	Karina Figueroa				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	11908 Whitewing Ave Austin, T	X 78753-2254			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/12/2016	Scott Flack	_			\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	1401 Falcon Ledge Dr Austin, T	X 78746-6101			
8. Principal oc President	cupation / Job title (See Instruction	ns)		yer (See Instructions) .ive Oak Gottesman	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/01/2016	Cid Galindo				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	411 Brazos St Ste 99 Austin, TX	78701-3608			
1 .	cupation / Job title (See Instruction	ns)		yer (See Instructions)	
Property M	Management			Self	

SCHEDULE A1

The	Instruction Guide explains how	to complete this form.	1. Total pages Schedule A1: not available
2. FILER NAM Mrs Natalie (			3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC	7. Amount of contribution (\$)
07/08/2016	Patrick Gallagher		\$25.00
	6. Contributor address;	City; State; ZIP Coo	te
	604 Franklin Blvd Apt C Austin,	TX 78751-1800	
B. Principal oc	cupation / Job title (See Instruction	ns) 9 En	nployer (See Instructions)
1. Date	5. Full name of contributor	out-of-state PAC	7. Amount of contribution (\$)
07/17/2016	Kelly Galvin		\$25.00
	6. Contributor address;	City; State; ZIP Cod	de
	2202 Riverside Farms Rd Austin	, TX 78741-4815	
8. Principal oc	ccupation / Job title (See Instruction	ns) 9 En	nployer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC	7. Amount of contribution (\$)
08/30/2016	Pam Gauldin		\$100.00
	6. Contributor address;	City; State; ZIP Co	de
	2700 N Lutheran Church Rd Day	ton, OH 45426-4316	
8. Principal oc	ccupation / Job title (See Instruction	ns) 9 Er	nployer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC	7. Amount of contribution (\$)
08/30/2016	Tom Gauldin		\$50.00
	6. Contributor address;	City; State; ZIP Co	de
	428 Broadway St Washington Co	ourt House, OH 43160-2004	
8. Principal oc	ccupation / Job title (See Instruction	ns) 9 Er	nployer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC	7. Amount of contribution (\$)
	Paulette Gibbins		\$100.00
08/16/2016			
08/16/2016	6. Contributor address;	City; State; ZIP Co	de

SCHEDULE A1

Instruction Guide explains how	to complete this for		1. Total pages Schedule A1: not available	
E Gauldin			3. Filer ID (Ethics Commission Fi	ilers)
5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
Casey Giles				\$50.00
6. Contributor address;	City; State;	ZIP Code		
5103 Split Cedar Cv Austin, TX	78735-6415			
cupation / Job title (See Instruction	ıs)	9 Emplo	yer (See Instructions)	
5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	•
Joseph Goessling	—			\$20.00
6. Contributor address;	City; State;	ZIP Code		
1913 Richcreek Rd Austin, TX 7	8757-1849			
cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
Patrick Goetz				\$100.00
6. Contributor address;	City; State;	ZIP Code		
503 Nelray Blvd Unit B Austin,	TX 78751-1126			
cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
Teresa Griffin	_			\$50.00
6. Contributor address;	City; State;	ZIP Code		
4009 Avenue B Austin, TX 7875	51-4516			
cupation / Job title (See Instruction	ns)	9 Emplo	over (See Instructions)	
5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
Fionnuala Gunter				\$25.00
6. Contributor address;	City; State;	ZIP Code		
1500 Alguno Rd Austin, TX 787	757-3304			
cupation / Job title (See Instructio	ns)	9 Emplo	over (See Instructions)	
	E Fauldin 5. Full name of contributor Casey Giles 6. Contributor address; 5103 Split Cedar Cv Austin, TX cupation / Job title (See Instruction 5. Full name of contributor Joseph Goessling 6. Contributor address; 1913 Richcreek Rd Austin, TX 7 cupation / Job title (See Instruction 5. Full name of contributor Patrick Goetz 6. Contributor address; 503 Nelray Blvd Unit B Austin, cupation / Job title (See Instruction 5. Full name of contributor Casey Giles 5. Full name of contributor Casey Giles 5. Full name of contributor 6. Contributor address; 1500 Alguno Rd Austin, TX 787	E Bauldin  5. Full name of contributorout-of-state PAC Casey Giles  6. Contributor address; City; State; 5103 Split Cedar Cv Austin, TX 78735-6415  cupation / Job title (See Instructions)  5. Full name of contributorout-of-state PACJoseph Goessling  6. Contributor address; City; State; 1913 Richcreek Rd Austin, TX 78757-1849  cupation / Job title (See Instructions)  5. Full name of contributorout-of-state PACPatrick Goetz  6. Contributor address; City; State; 503 Nelray Blvd Unit B Austin, TX 78751-1126  cupation / Job title (See Instructions)  5. Full name of contributorout-of-state PACPatrick Goetz  6. Contributor address; City; State; 503 Nelray Blvd Unit B Austin, TX 78751-1126  cupation / Job title (See Instructions)  5. Full name of contributorout-of-state PACTeresa Griffin  6. Contributor address; City; State; 4009 Avenue B Austin, TX 78751-4516  cupation / Job title (See Instructions)  5. Full name of contributorout-of-state PACTeresa Griffin  6. Contributor address; City; State; 4009 Avenue B Austin, TX 78751-4516  cupation / Job title (See Instructions)  5. Full name of contributorout-of-state PACTeresa Griffin  5. Full name of contributor	iauldin         5. Full name of contributor	Instruction Guide explains how to complete this form.       not available         Image: Second S

# SCHEDULE A1

The In	struction Guide explains how	to complete this fo	orm.	1. Total pages Schedule A1: not available	
2. FILER NAME Mrs Natalie Ga	uldin			3. Filer ID (Ethics Commission I	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Mark Hand				\$10.00
	6. Contributor address;	City; State;	ZIP Code		<b>410</b> .00
	1007 Taffy Ct Austin, TX 78704	-6923			
8. Principal occu	pation / Job title (See Instruction	IS)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/18/2016	June Harriss				\$350.00
	6. Contributor address;	City; State;	ZIP Code		4550.00
	5333 Tortuga Trl Austin, TX 787	31-4545			
8. Principal occu Research As	pation / Job title (See Instruction sociate	s)		yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	I	7. Amount of contribution (\$)	
08/18/2016	William Harriss	_			\$350.00
	6. Contributor address;	City; State;	ZIP Code		\$550.00
	5333 Tortuga Trt Austin, TX 787	31-4545			
8. Principal occu Chief Financ	pation / Job title (See Instruction ial Officer	s)		yer (See Instructions) utler Family Interests	
4. Date	5. Full name of contributor	out-of-state PAC	·	7. Amount of contribution (\$)	
08/16/2016	НВА НОМЕ РАС				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	8140 Exchange Dr Austin, TX 78	754-5236			
8. Principal occu	pation / Job title (See Instruction	s)	9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/10/2016	Charles Heimsath				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	1609 Preston Ave Austin, TX 787	/03-1905			
8. Principal occu Real Estate C	pation / Job title (See Instruction Consultant	s)		ver (See Instructions) MR	

SCHEDULE A1

The li	nstruction Guide explains how	to complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAME Mrs Natalie G				3. Filer ID (Ethics Commission Fi	lers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/13/2016	BJ Heinley				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	810 Blanco St Austin, TX 78703	-4912			
8. Principal occ	upation / Job title (See Instruction	าร)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/19/2016	Ricky Hennessy				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	810 E 48th St Austin, TX 78751-	-3315			
8. Principal occ Data Scient	cupation / Job title (See Instruction tist	ns)		yer (See Instructions) rog	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/26/2016	Minette Heuer				\$150.00
	6. Contributor address;	City; State;	ZIP Code		
	7416 Mifflin Kenedy Ter Austin	, TX 78749-1843			
8. Principal occ	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/26/2016	Herbert Holland				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	8104 Asmara Dr Austin, TX 787	50-7808			
8. Principal occ	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	l	7. Amount of contribution (\$)	
09/10/2016	Joe Hootman				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	11919 Meadowfire Dr Austin, T	X 78758-3318			
8. Principal occ	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	

SCHEDULE A1

The	Instruction Guide explains how	to complete this for	rm.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/11/2016	Monta Kennady				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	5001 Crystal Downs Ct College S	Station, TX 77845-895	3		
8. Principal oc	ccupation / Job title (See Instruction	IS)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/12/2016	Dustin Kim				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	911 Banyon St Austin, TX 78757	7-1506			
8. Principal oc	ccupation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Dustin Kim				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	911 Banyon St Austin, TX 78757	7-1506			
8. Principal oc	ccupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/26/2016	John King				\$75.00
	6. Contributor address;	City; State;	ZIP Code		
	4918 Finley Dr Austin, TX 7873	1-5639			
8. Principal oc	ccupation / Job title (See Instruction		9 Emplo	over (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	I	7. Amount of contribution (\$)	
07/31/2016	Jesse Kipp				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	7425 Wolverine St Austin, TX 7	8757-1523			
8. Principal of Software	ccupation / Job title (See Instruction Engineer	ns)	· · ·	oyer (See Instructions) RigUp, Inc.	

SCHEDULE A1

The I	Instruction Guide explains how	to complete this for	m.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie (		······································		3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/19/2016	Jesse Kipp				\$295.00
	6. Contributor address;	City; State;	ZIP Code		
	7425 Wolverine St Austin, TX 7	8757-1523			
<ol> <li>Principal oct Software E</li> </ol>	cupation / Job title (See Instruction	ns)	-	yer (See Instructions) SigUp, Inc.	· · · ·
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/26/2016	Susan Kirtz				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	1007 S Congress Ave Apt 315 A	ustin, TX 78704-1748			
8. Principal oc	cupation / Job title (See Instruction	าร)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	·	7. Amount of contribution (\$)	
09/29/2016	Kate Kniejski				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
1	2309 Santa Rosa St Austin, TX 7	8702-4629			
8. Principal oc	cupation / Job title (See Instruction	15)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Andrew Lambdin-Abraham				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	14105 Naruna Way Pflugerville,	TX 78660-5462			
8. Principal oc	cupation / Job title (See Instruction	าร)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/29/2016	John Laycock				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	80 Red River St 204 Austin, TX	78701-4235			
8. Principal oc	cupation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)	

Į

SCHEDULE A1

The I	Instruction Guide explains how to complete this form.	1. Total pages Schedule A1: not available
2. FILER NAM Mrs Natalie C		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
08/29/2016	John Laycock	\$5.00
	6. Contributor address; City; State; ZIP Code	
	80 Red River St 204 Austin, TX 78701-4235	
8. Principal occ	cupation / Job title (See Instructions) 9 Emplo	over (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
09/29/2016	John Laycock	\$5.00
	6. Contributor address; City; State; ZIP Code	
	80 Red River St 204 Austin, TX 78701-4235	
8. Principal oco	cupation / Job title (See Instructions) 9 Empl	oyer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
07/17/2016	Kimberly Levinson	\$100.00
	6. Contributor address; City; State; ZIP Code	
	98 San Jacinto Blvd FSR 1007 Austin, TX 78701-4082	
8. Principal oc Retired	· · · · · · · · · · · · · · · · · · ·	oyer (See Instructions) Retired
4. Date	5. Full name of contributor	7. Amount of contribution (\$)
08/26/2016	Кетті Lewis	\$100.00
	6. Contributor address; City; State; ZIP Code	
	PO Box 12991 Apt 721 Austin, TX 78711-2991	
8. Principal oc	cupation / Job title (See Instructions) 9 Empl	oyer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
09/15/2016	Jill Locy	\$100.00
	6. Contributor address; City; State; ZIP Code	
	4200 Jackson Ave Apt 5007 Austin, TX 78731-6068	
8. Principal oc	cupation / Job title.(See Instructions) 9 Empl	oyer (See Instructions)

SCHEDULE A1

The	Instruction Guide explains how	to complete this for	rm.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie (				3. Filer ID (Ethics Commission Fi	lers)
4. Date	5. Full name of contributor	out-of-state PAC	<u>.                                    </u>	7. Amount of contribution (\$)	
07/01/2016	Christopher Lyons				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	5103 Woodmoor Dr Austin, TX	78721-1616			
8. Principal oc	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/23/2016	Colin MacDougal				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	1515 Karen Ave Austin, TX 787	57-2915			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/01/2016	Will Mackintosh				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	4311 Ramsey Ave Austin, TX 7	8756-3206			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/17/2016	Josh Margolis				\$30.00
	6. Contributor address;	City; State;	ZIP Code		
-	6204 Reicher Dr Austin, TX 787	23-3735			
8. Principal oc	ccupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/26/2016	Steven Mayer				\$20.00
	6. Contributor address;	City; State;	ZIP Code		
	7300 Fireoak Dr Austin, TX 787	59-4564			
8. Principal oc	ccupation / Job title (See Instructio	ns)	9 Emplo	over (See Instructions)	

SCHEDULE A1

The	Instruction Guide explains how	to complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie				3. Filer ID (Ethics Commission File	rs)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Matt Mccormack				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	1107 W Monroe St Austin, TX 7	8704-3459			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4 Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/31/2016	Rahm McDaniel				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	2129 McCloskey St Austin, TX 7	8723-5462	,		
8. Principal oc	cupation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)	·
4. Date	5. Full name of contributor	out-of-state PAC	L	7. Amount of contribution (\$)	
08/16/2016	Bungane Mehlomakulu				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	1700 Payne Ave Austin, TX 787:	57-2926			
<ol> <li>Principal oc</li> </ol>	cupation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/16/2016	Bungane Mehlomakulu				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	1700 Payne Ave Austin, TX 7873	57-2926			
<ol> <li>Principal oc</li> </ol>	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
9/26/2016	Kevin Miller				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	12323 Tomanet Trl Austin, TX 7	8758-2419			
3. Principal oc	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Forms provided by Texas Ethics Commission

SCHEDULE A1

The	Instruction Guide explains how	to complete this for	rm.	1. Total pages Schedule A1: not available	
2. FILER NAN Mrs Natalie				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/31/2016	Douglas Mink				\$10.00
	6. Contributor address;	City; State;	ZIP Code		
	4206 Balcones Dr Austin, TX 78	731-5706			
8. Principal oc	ccupation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/31/2016	Lisa Mink	_			\$10.00
	6. Contributor address;	City; State;	ZIP Code		
	4206 Balcones Dr Austin, TX 78	731-5706			
8. Principal oc	ccupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/16/2016	Shelly Mitchell				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	4600 Bilboa Dr Austin, TX 7875	9-5223			
8. Principal oc	ccupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	I	7. Amount of contribution (\$)	
09/27/2016	Britt & Brittany Morrison				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	5005 W Frances PI Austin, TX 7	8731-5019			
8. Principal of Real Esta	ccupation / Job title (See Instruction	าร)		yer (See Instructions) Austin Title	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/16/2016	Nick Moulinet				\$350.00
	6. Contributor address;	City; State;	ZIP Code		-
	15201 Gebron Dr Lakeway, TX	78734-6305			
	ccupation / Job title (See Instruction Development	าร)		oyer (See Instructions) Stantec	

SCHEDULE A1

The in	struction Guide explains how	to complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAME Mrs Natalie Ga				3. Filer ID (Ethics Commission File	ers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/14/2016	Alan Muskin				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	4009 Knollwood Dr Austin, TX	78731-2916			
8. Principal occu Self Employ	upation / Job title (See Instruction	ns)		yer (See Instructions) elf Employed	
4. Date	5. Full name of contributor	out-of-state PAC	I	7. Amount of contribution (\$)	
09/29/2016	Alan Muskin				\$100.00
	6. Contributor address;	City; State;	ZIP Code		•
	4009 Knollwood Dr Austin, TX	78731-2916			
8. Principal occu Self Employ	upation / Job title (See Instruction	 ns)		yer (See Instructions) elf Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/11/2016	Ryan Nill				\$20.00
	6. Contributor address;	City; State;	ZIP Code		
	7910 Gault St 111 Austin, TX 78	757-8418			
8. Principal occu	upation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	·	7. Amount of contribution (\$)	
07/17/2016	Caroline O'Meara				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	1716 W Saint Johns Ave Austin,	TX 78757-1822			
8. Principal occu	upation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/26/2016	Laura Olien				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	1402 Doonesbury Dr Austin, TX	78758-3708			
8. Principal occu	upation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	

SCHEDULE A1

The In:	struction Guide explains how	to complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAME Mrs Natalie Ga	uldin			3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC	······································	7. Amount of contribution (\$)	
08/14/2016	Pablo Oria				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	2604 Twin Oaks Dr Austin, TX 3	78757-2736			
8. Principal occu	pation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Michael Padavic				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	4111 Spicewood Springs Rd Uni	t 8 Austin, TX 78759-	8780		
8. Principal occu Architect	pation / Job title (See Instruction	15)		yer (See Instructions) SW Homes LLC	
4. Date	5. Full name of contributor	out-of-state PAC	'	7. Amount of contribution (\$)	
09/26/2016	Ruth Palmer				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	2332 Dunstan Rd Houston, TX 7	7005-2650			
8. Principal occu	pation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	· •
07/26/2016	Alexander Papavasiliou				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	405 Wilmes Dr Austin, TX 7875	2-4136			
8. Principal occu	pation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	I	7. Amount of contribution (\$)	
08/15/2016	James Parker				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	3502 Cherry Ln Austin, TX 7876	03-2612			
8. Principal occu	pation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	<u> </u>

# SCHEDULE A1

The	Instruction Guide explains how t	to complete this for	m.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalic (				3. Filer ID (Ethics Commission Fil	ers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/07/2016	Caleb Parsons				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	1748 Ohlen Rd Apt 49 Austin, T	X 78757-7863			
8. Principal oc	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
1. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/15/2016	Mary Anna Paul				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	6737 Poncha Pass Austin, TX 78	749-4251			
<ol> <li>Principal oc Real estate</li> </ol>	cupation / Job title (See Instruction e broker	us)		yer (See Instructions) Vilson & Goldrick Realtors	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/12/2016	Chris Peterson				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	1114 Lost Creek Blvd Ste 200 A	ustin, TX 78746-6374			
8. Principal oc	ccupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/20/2016	Steven Portnoy	_			\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	7617 Journeyville Dr Austin, TX	78735-1807			
8. Principal oc real estate	ccupation / Job title (See Instruction	ns)	· ·	yer (See Instructions) self Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
9/28/2016	Robert Prentiss				\$150.00
	6. Contributor address;	City; State;	ZIP Code		
	4205 Speedway Apt 105 Austin,	TX 78751-3757			
8. Principal oc	ccupation / Job title (See Instruction	ns)	9 Emplo	over (See Instructions)	

# SCHEDULE A1

The	Instruction Guide explains how	to complete this fo	m.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/26/2016	James Pustejovsky				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	7325 Wolverine St Austin, TX 7	8757-1521		· ·	
8. Principal oc	cupation / Job title (See Instruction	าร)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/24/2016	Mary Pustejovsky	_			\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	7325 Wolverine St Austin, TX 7	8757-1521			
8. Principal oc	ccupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	<u>_</u>	7. Amount of contribution (\$)	
08/24/2016	Mary Pustejovsky				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	7325 Wolverine St Austin, TX 7	8757-1521			
8. Principal oc	ccupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/24/2016	Mary Pustejovsky				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	7325 Wolverine St Austin, TX 7	8757-1521			
8. Principal oc	ccupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/26/2016	Melissa Rabcaux-Rosen				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	4707 Greystone Dr Austin, TX 7	8731-1112			
8. Principal oc	ccupation / Job title (See Instructio	ns)	9 Emplo	yer (See Instructions)	

SCHEDULE A1

The	Instruction Guide explains how	to complete this fo	orm.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie				3. Filer ID (Ethics Commission I	Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/16/2016	Mark Ramsour				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	614 W Bartlett Dr Buda, TX 786	10-3468			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/14/2016	Douglass Rauls				\$250.00
	6. Contributor address;	City; State;	ZIP Code		5220.00
	2301 Matterhorn Ln Austin, TX	78704-4635			
<ol> <li>Principal oc Brokerage</li> </ol>	cupation / Job title (See Instruction	ns)	· ·	yer (See Instructions) elf Employed	
4. Date	5. Full name of contributor	out-of-state PAC	····	7. Amount of contribution (\$)	,
09/27/2016	Peter Rieck				\$200.00
	6. Contributor address;	City; State;	ZIP Code		
	7131 Valburn Dr Austin, TX 787	31-1812			
8. Principal oc Retired	cupation / Job title (See Instruction	is)	· · ·	yer (See Instructions) etired	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	-
09/14/2016	Brendon Riggs				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	2008 Singing Brk Austin, TX 78	723-3447			
8. Principal oc	cupation / Job title (See Instruction	IS)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/12/2016	Chris Riley				\$50.00
	6. Contributor address;	City; State;	ZIP Code		·
	324 Grand Ave Apt 4H Brooklyn	, NY 11238-2168			
8. Principal oc	cupation / Job title (See Instruction	s)	9 Employ	yer (See Instructions)	

# SCHEDULE A1

The	Instruction Guide explains how	to complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie				3. Filer ID (Ethics Commission I	-ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/30/2016	Donna Rizzo				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	1503 Bridgeway Dr # B Austin, 7	TX 78704-4955			
8. Principal oc Owner	cupation / Job title (See Instruction	ns)		yer (See Instructions) imarron Office Products	
4 Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/03/2016	Angel Rodenbeck				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	2102 Matterhorn Ln Austin, TX	78704-4632			
	cupation / Job title (See Instruction Home Stager	ns)	,	yer (See Instructions) pyglass Realty and Investments	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/03/2016	Ryan Rodenbeck				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	2102 Matterhorn Ln Austin, TX	78704-4632			
<ol> <li>Principal oc Broker</li> </ol>	cupation / Job title (See Instruction	ns)		yer (See Instructions) pyglass Realty and Investments	
4 Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/31/2016	Robert Rutishauser				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	4200 Jackson Ave Apt 5015 Aus	tin, TX 78731-6061			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/28/2016	Devon Ryan				\$75.00
	6. Contributor address;	City; State;	ZIP Code		
	260 Swain Way Palo Alto, CA 94	4304-2389			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	

SCHEDULE A1

The	Instruction Guide explains how	to complete this for		1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie (	IE Gauldin			3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/16/2016	Ken Sample				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	2600 Fiset Dr Austin, TX 78731-	5614			
8. Principal oc	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4 Date	5. Full name of contributor	out-of-state PAC	l	7. Amount of contribution (\$)	
09/29/2016	Zoc Schlag				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	2794 Linden Dr Boulder, CO 803	04-0429			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/07/2016	Phillip Schmandt				\$100.00
-	6. Contributor address;	City; State;	ZIP Code		
	11 Hull Circle Dr West Lake Hil	ls, TX 78746-3709			
8. Principal oc	ccupation / Job title (See Instruction	 IS)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	I	7. Amount of contribution (\$)	
09/12/2016	Mitch Schwartz				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	106 Muscovy Austin, TX 78734				
8. Principal oc	ccupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	, <u></u>	7. Amount of contribution (\$)	
09/14/2016	Randi Shade				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	1822 W 10th St Austin, TX 7870	3-3910			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	

SCHEDULE A1

The I	Instruction Guide explains how I	o complete this for	rm.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie (				3. Filer ID (Ethics Commission F	filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/28/2016	Rob Shands				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	2525 S Lamar Blvd Apt 304 Aust	in, TX 78704-4789			
8. Principal occ	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Lucinda Shirley				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	3600 Chateau Dr # T141 Columb	ia, SC 29204-3910			
8. Principal oc	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	1	7. Amount of contribution (\$)	
08/24/2016	Steve Simmons				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	1101 W Anderson Ln Austin, TX	78757-1446			
8. Principal oc Owner	cupation / Job title (See Instruction	s)		yer (See Instructions) mys Ice Cream	
4. Date	5. Full name of contributor	out-of-state PAC	<u></u>	7. Amount of contribution (\$)	
07/21/2016	Mary Sledd				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	2009 Kinney Ave Austin, TX 787	04-4007			
8. Principal oc	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	t	7. Amount of contribution (\$)	
07/25/2016	Curtis Smith				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	1716 Justin Ln Austin, TX 78757	-2537			
8. Principal oc	cupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	

SCHEDULE A1

The	Instruction Guide explains how	to complete this form	n.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie (				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/23/2016	Paul Smith				\$10.00
	6. Contributor address;	City; State;	ZIP Code		
	7801 Shoal Creek Blvd Apt 228	Austin, TX 78757-1029			
8. Principal oc	cupation / Job title (See Instruction	IS)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	_!	7. Amount of contribution (\$)	
09/12/2016	Paul Smith				\$10.00
	6. Contributor address;	City; State;	ZIP Code		
	7801 Shoal Creek Blvd Apt 228	Austin, TX 78757-1029			
8. Principal oc	cupation / Job title (See Instruction	 IS)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	<i>"</i>	7. Amount of contribution (\$)	
09/28/2016	Paul Smith				\$10.00
	6. Contributor address;	City; State;	ZIP Code		
	7801 Shoal Creek Blvd Apt 228	Austin, TX 78757-1029			
8. Principal oc	cupation / Job title (See Instruction	IS)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/01/2016	Andrew Stalick				\$20.00
	6. Contributor address;	City; State;	ZIP Code		
	1713 E 38th St Austin, TX 78722	2-1201			
8. Principal oc	cupation / Job title (See Instruction	ıs)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/16/2016	Taylor Steed				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	1601 Rio Grande St Ste 333 Aus	tin, TX 78701-1149			
	cupation / Job title (See Instruction	ıs)	· · ·	yer (See Instructions)	
Real Estat	e			our'l' Realty	

# SCHEDULE A1

The	Instruction Guide explains how	to complete this for	m.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie (				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Taylor Steed				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	1601 Rio Grande St Ste 333 Aust	iin, TX 78701-1149			
<ol> <li>B. Principal oc Real Estate</li> </ol>	cupation / Job title (See Instruction	15)	· · ·	yer (See Instructions) ourT Realty	
4. Date	5. Full name of contributor	out-of-state PAC	_ /	7. Amount of contribution (\$)	
09/29/2016	Lonny Stern				\$100.00
1	6. Contributor address;	City; State;	ZIP Code		
	2929A E 13th St Austin, TX 787	02-2419			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/07/2016	Garner Stoll				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	12205 Edwards Hollow Run Aus	tin, TX 78739-7624			
8. Principal oc	cupation / Job title (See Instruction	15)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/12/2016	Laramie Stroud				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	PO Box 1846 Austin, TX 78767-	1846			
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	· _ · _ · _	7. Amount of contribution (\$)	
09/29/2016	Laramie Stroud				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	PO Box 1846 Austin, TX 78767-	1846			
8. Principal oc	cupation / Job title (See Instruction		9 Emplo	yer (See Instructions)	

SCHEDULE A1

The I	Instruction Guide explains how	to complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie (				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/05/2016	Julie Swoope				\$25.00
	6. Contributor address;	City; State;	ZIP Code		• · · ·
Į	568 Vanderbilt Ave Apt 8 Brook	lyn, NY 11238-3557			
8. Principal occ	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/15/2016	Julie Swoope				\$25.00
	6. Contributor address;	City; State;	ZIP Code		ф <b>2</b> 9.00
	568 Vanderbilt Ave Apt 8 Brook	lyn, NY 11238-3557			
8. Principal occ	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	I	7. Amount of contribution (\$)	
07/29/2016	Abigail Tatkow				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	2500 E 2nd St Austin, TX 78702	-4708			
8. Principal occ	cupation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	·
08/29/2016	Abigail Tatkow				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	2500 E 2nd St Austin, TX 78702-	-4708			
8. Principal occ	cupation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	· · · ·	7. Amount of contribution (\$)	
09/29/2016	Abigail Tatkow				\$5.00
	6. Contributor address;	City; State;	ZIP Code		
	2500 E 2nd St Austin, TX 78702-	-4708			
8. Principal occ	cupation / Job title (See Instruction	s)	9 Emplo	ver (See Instructions)	- ,

ŝ

SCHEDULE A1

۰,

The	Instruction Guide explains how	to complete this for	rm.	1. Total pages Schedule A1: not available	
2. FILER NAM Mrs Natalie				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/28/2016	Brittany Taylor				\$40.00
	6. Contributor address;	City; State;	ZIP Code		
	12402 Knoll Ridge Dr Austin, T	K 78758-2715			
8. Principal oc	ccupation / Job title (See Instruction	IS)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/15/2016	John Thompson	-			\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	2600 Esperanza Xing Unit 4106	Austin, TX 78758-211	2		
8. Principal oc	ccupation / Job title (See Instruction	IS)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Ward Tisdale				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	4701 Gillis St Austin, TX 78745-	1813			
8. Principal oc	ccupation / Job title (See Instruction	IS)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/11/2016	Betty Trent				\$50.00
	6. Contributor address;	City; State;	ZIP Code		•••
	2822A Wooldridge Dr Austin, 1	X 78703-1956			
8. Principal oc	ccupation / Job title (See Instruction	IS)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Scott Turner				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	3201 Sunny Ln Austin, TX 7873	1-5433			
•	ccupation / Job title (See Instruction	าร)		yer (See Instructions)	· · · · ·
Home Bu	ilder		F	liverside Homes LLC	

SCHEDULE A1

The I	nstruction Guide explains how	to complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAMI Mrs Natalie G	-		· · · ·	3. Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Marilyn Vache			s	50.00
	6. Contributor address;	City; State;	ZIP Code		
	3112 Windsor Rd A508 Austin,	FX 78703-2350			
8. Principal occ	upation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Katie Van Dyk			s	25.00
	6. Contributor address;	City; State;	ZIP Code	Ť	22.00
	2805 Dulce Ln Unit 1003 Austin	, TX 78704-4468			
8. Principal occ	upation / Job title (See Instruction	ns)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/18/2016	Danielle Vaughan			\$3.	50.00
	6. Contributor address;	City; State;	ZIP Code		
	803 Jessie St Austin, TX 78704-	1527			
8. Principal occ SSP	upation / Job title (See Instruction	ns)	-	yer (See Instructions) licrosoft	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/18/2016	James Vaughan			\$3	50.00
	6. Contributor address;	City; State;	ZIP Code		
	803 Jessie St Austin, TX 78704-	1527			
8. Principal occ Co-Founde	upation / Job title (See Instruction	IS)		yer (See Instructions) alue Voting, Inc.	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/01/2016	James Voight			\$	25.00
	6. Contributor address;	City; State;	ZIP Code		
	1900 Belford Dr Austin, TX 787	57-8206			
8. Principal occ	upation / Job title (See Instruction	ns)	9 Emplo	ver (See Instructions)	

,

SCHEDULE A1

The li	nstruction Guide explains how	to complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAME Mrs Natalie G	-			3. Filer ID (Ethics Commission Fi	lers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/09/2016	Tom Wald				\$10.00
	6. Contributor address;	City; State;	ZIP Code		
	4016 Maplewood Ave Austin, 12	K 78722-1518			
8. Principal occ	upation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/28/2016	Tom Wald				\$25.00
	6. Contributor address;	City; State;	ZIP Code		
	4016 Maplewood Ave Austin, TX	<b>x</b> 78722-1518			
8. Principal occ	upation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/06/2016	Warren Walters				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	1518 Barton Springs Rd Trlr 68 A	Austin, TX 78704-105	l		
8. Principal occ Real Estate	upation / Job title (See Instruction	is)	-	yer (See Instructions) V2 Real Estate Partners	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/29/2016	Richard Webre				\$15.00
	6. Contributor address;	City; State;	ZIP Code		
	2603 Reeves Cir # B Austin, TX	78741-5624			
8. Principal occ	upation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	·	7. Amount of contribution (\$)	
07/01/2016	Serena Whitehair				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	416 Dogwood Dr Salisbury, MD	21801-7132			
8. Principal occ	upation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	

SCHEDULE A1

The In	struction Guide explains how t	o complete this fo	rm.	1. Total pages Schedule A1: not available	
2. FILER NAME Mrs Natalic Ga				3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
08/30/2016	Screna Whitehair				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	416 Dogwood Dr Salisbury, MD	21801-7132			
8. Principal occu	upation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/28/2016	Courtney Whitworth				\$350.00
	6. Contributor address;	City; State;	ZIP Code		
	3907 Edgerock Dr Austin, TX 78	731-1426			
8. Principal occu Interior Des	upation / Job title (See Instruction igner	S)	· ·	yer (See Instructions) elf Employed	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
07/13/2016	K.C. Willis Willis				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	3103 Honey Tree Ln Austin, TX	78746-6723			
8. Principal occu Land/Cattle	upation / Job title (See Instruction	s)		yer (See Instructions) Villis Co.	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/14/2016	Ross Wilson				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	811 Christopher St Austin, TX 78	3704-1617			
8. Principal occu	upation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
09/26/2016	Lane Wimberley				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	4810 Shoal Creek Blvd Austin, T	X 78756-2813			
8. Principal occu	upation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)	

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1. Total pages Schedule A1: not available		
2. FILER NAM Mrs Natalie				3. Filer ID (Ethics Commission Filers)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)		
09/29/2016	Chris Wojtewicz			\$25.00		
:	6. Contributor address;	City; State;	ZIP Code			
	8409 Adirondack Trl Austin, TX	78759-8411				
8. Principal oc	cupation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)		
07/13/2016	Ahmad Zaatari			\$200.00		
	6. Contributor address;	City; State;	ZIP Code			
	8818 Travis Hills Dr Apt 1132 A	ustin, TX 78735-1799	)			
8. Principal oc	cupation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)		
Manager			S	Self Employed		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)		
09/29/2016	Alex Zwarun			\$50.00		
	6. Contributor address;	City; State;	ZIP Code			
	5108 Avenue G Austin, TX 7875	1-2022				
8. Principal oc	cupation / Job title (See Instruction	ns)	9 Emplo	over (See Instructions)		

## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A2: not available					
		3. Filer ID (Ethics Commission Filers)					
4. TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIBUTI	ONS			\$0.00		
5 Date 07/07/2016	6 Full name of contributorout-of Texas Democratic Party 7 Contributor address; City; State; Zip Code 1006 Lavaca St Suite 100 Austin, TX 78701-2331	Democratic Party Democratic State; Zip Code		8 Amount of contribution (\$) \$350.00	9 In-Kind contribution description Voter File Access		
10 Principal occu	upation / Job Title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR	R NON-J	UDICIAL) (See Instructi	le of Texas, complete Schedule T ons)		
12 Contributor's	12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
16 If contributor i	is a child, law firm of parents (if any) (FOR JUDICIAL)						
5 Date 09/11/2016	6 Full name of contributorout-of Tina A. Barrett 7 Contributor address; City; State; Zip Code 4700 Hilwin Cir Austin, TX 78756-2806	I-state PAC		8 Amount of contribution (\$) \$101.49	<ul> <li>In-Kind contribution description</li> <li>Food and Drinks for</li> <li>Campaign House Party</li> <li>on 9-11</li> </ul>		
		11 Employer (FOF	Check if travel outside of Texas, complete Schedule T  I1 Employer (FOR NON-JUDICIAL) (See Instructions)				
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's jo	13 Contributor's job title (FOR JUDICIAL) (See Instructions)				
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of con	itributor'	s spouse (if any) (FOR 、	JUDICIAL)		
16 If contributor	is a child, law firm of parents (if any) (FOR JUDICIAL)						

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Instruction Guide explains how to complete this form.		1. To	1. Total pages Schedule A2: not available			
		3. Filer ID (Ethics Commission Filers)				
4. TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS			\$0.00	
5 Date 09/27/2016	6 Full name of contributorout-of-state PAC Kimberly Levinson 7 Contributor address; City; State; Zip Code			8 Amount of contribution (\$) \$188.56	9 In-Kind contribution description Drinks for Campaign Fundraiser on 9-28	
	98 San Jacinto Blvd FSR 1007 Austin, TX 787	01-4082		Check if travel outsid	e of Texas, complete Schedule T	
Retired Reti		Retired	11 Employer (FOR NON-JUDICIAL) (See Instructions)			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of co	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
16 If contributor i	is a child, law firm of parents (if any) (FOR JUDICIAL)	<b>I</b>				
5 Date		out-of-state PAC		8 Amount of contribution (\$)	9 In-Kind contribution description	
09/11/2016	Betty Trent           7 Contributor address; City; State; Zip Code           2822A Wooldridge Dr Austin, TX 78703-1956				Food for Campaign House Party on 9-11 e of Texas, complete Schedule T	
10 Principal occi	upation / Job Title (FOR NON-JUDICIAL) / See Instruction	ns) 11 Employer (FC	R NON-	IUDICIAL) (See Instructi		
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's	13 Contributor's job title (FOR JUDICIAL) (See Instructions)			
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of co	ontributor	s spouse (if any) (FOR J	IUDICIAL)	
16 If contributor	is a child, law firm of parents (if any) (FOR JUDICIAL)					

# LOANS

### SCHEDULE E

The Ins	The Instruction Guide explains how to complete this form.			dule E:	
2. FILER NAME Mrs Natalie Gauldin			3. Filer ID (Ethics Commission Filers)		
4. TOTAL OF U	INITEMIZED LOANS			\$0.00	
5. Date of loan	7. Name of lender Out-of-state PAC		·	9. Loan Amount	
07/25/2016	Timothy Bray			\$218.27	
6 Is lender a financial Institution?	8. Lender address; City; Sta 4801 Placid Pl Austin, TX 78731-5518	te; ZIP	Code	10. Interest rate 0.00% 11. Maturity date	
		40 5	( <b>0 1</b> +		
12. Principal occ	upation / Job title (See Instructions)	13 Employer	(See Instructions)		
14. Description o √none	f Collateral	15 Check if pe	ersonal funds were de	posited into political account	
16 GUARANTOR INFORMATION	17 Name of guarantor	. <u></u>	15	9 Amount Guaranteed (\$)	
	18 Guarantor address; City; Sta	ite; ZIP	Code		
rot ⊿applicable					
20 Príncipal Occ	upation (See Instructions)	21 Empl	oyer (See Instructions	)	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense     Event Expense     Office Overhead/Rental     Solicitation/Fundralsing Expense       Accounting/Banking     Fees     Polling Expense     Transportation Equipment & Rela       Consulting Expense     Food/Beverage Expense     Printing Expense     Expense       Contributions/Donations Made By     Gift/Awards/Memorials Expense     Salaries/Wages/Contract Labor     Travel In District       Candidate/Officeholder/Political     Legal Services     Other (enter a category not listed       Credit Card Payment     The Instruction Guide explains how to complete this form.					
Credit Card Payment		se explains now to col			
1. Total pages Schedule F1:	2. FILER NAME Mrs Natalie Gauldin		3. Fil	er ID (Ethics Commission Filers)	
4 Date 07/25/2016	5 Payee name 9415 Burnet Rd, LTD.				
6 Amount \$603.23	7 Payee address;	City;	State:	Zip Code	
	4330 Gaines Ranch Loop Ste 1	00 Austin, TX 78735-61	734		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)		ption heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense Office Rent July	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held	
4 Date	5 Payee name				
08/08/2016	9415 Burnet Rd, LTD.				
6 Amount \$1,100.00	<ul><li>7 Payee address;</li><li>4330 Gaines Ranch Loop Ste 1</li></ul>	City; 00 Austin, TX 78735-6'	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)		ption heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense Office Rent August	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held	
4 Date 09/08/2016	5 Payee name 9415 Burnet Rd, LTD.				
6 Amount \$1,100.00	<ul> <li>7 Payee address;</li> <li>4330 Gaines Ranch Loop Ste 1</li> </ul>	City; 00 Austin, TX 78735-6'	<b>State</b> : 734	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)		ption heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense Office Rent September	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held	
	ATTACH ADDITIONAL COP	PIES OF THIS SCH	EDULE AS	NEEDED	

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 Office Overhead/Renta Fees Polling Expense Food/Beverage Expense Printing Expense Gift/Awards/Memorials Expense Salaries/Wages/Contra Legal Services	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.		
	2. FILER NAME	· .	er ID (Ethics Commission Filers)		
	Mrs Natalie Gau'din	0. 11			
4.0-1-					
4 Date	5 Payee name				
07/25/2016	Amazon.com LLC	State	Zip Code		
6 Amount \$101.74	7 Payee address; City; PO Box 81226 Seattle, WA 98108-1300	Sidle.			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense		ption heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense Office Supplies		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	nt Office held		
4 Date	5 Payee name				
07/27/2016	Amazon.com LLC				
6 Amount \$30.49	7 Payee address; City; PO Box 81226 Seattle, WA 98108-1300	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense		Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	nt Office held		
4 Date	5 Payee name				
08/30/2016	Amazon.com LLC		·		
6 Amount \$28.68	7 Payee address; City; PO Box 81226 Scattle, WA 98108-1300	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense		theck if travel outside of Texas, complete Schedule T Theck if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	nt Office held		
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS	NEEDED		

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense     Event Expense     Office Overhead/Rental     Solicitation/Fundraising Expense       Accounting/Banking     Fees     Polling Expense     Transportation Equipment & Related       Consulting Expense     Food/Beverage Expense     Printing Expense     Expense       Contributions/Donations Made By     Gift/Awards/Memorials Expense     Salaries/Wages/Contract Labor     Travel In District       Candidate/Officeholder/Political     Legal Services     Other (enter a category not listed above)       Credit Card Payment     The Instruction Guide explains how to complete this form.					
	2. FILER NAME	• •		er ID (Ethics Commission Filers)	
	Mrs Natalie Gauldin				
4 Date	5 Payee name				
09/09/2016	Amazon.com LLC				
6 Amount \$57.36	7 Payee address;	City;	State:	Zip Code	
	PO Box 81226 Scattle, WA 98	108-1300			
8 PURPOSE	(a) Category (See categories listed	al the top of this schedule)		heck if travel outside of Texas, complete Schedule T	
OF EXPENDITURE	Office Overhead/Rental Expense		Canvassing	check if Austin, TX, officeholder living expense Supplies	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held	
4 Date	5 Payee name				
09/13/2016	Anderson High School Footba	Il Booster Club			
6 Amount \$150.00	<ul><li>7 Payee address;</li><li>8403 Mesa Dr Austin, TX 787</li></ul>	City; 59-8117	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	I at the top of this schedule)		ption heck if travel outside of Texas, complete Schedule T check if Austin, TX, officeholder living expense Ad In Program	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held	
4 Date	5 Payee name				
09/19/2016	Austin Young Democrats				
6 Amount \$50.00	7 Payee address; PO Box 40301 Austin, TX 787	City; 704-0006	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories lister Event Expense	d at the top of this schedule)		Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ht Office held	
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE AS	S NEEDED	

### SCHEDULE F1

	EXPENDI	<b>FURE CATEGORIES</b>	FOR BOX 8	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Political Committee Credit Card Payment	Legal Connects	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
1. Total pages Schedule F1:				er ID (Ethics Commission Filers)
	Mrs Natalie Gauldin		0. 1 10	
4 Date	5 Payee name			
07/08/2016	Timothy Bray			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$675.00		•		
	4801 Placid Pl Austin, TX 787.	31-5518		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	
PURPOSE		,		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
EXPENDITURE	Salarics/Wages/Contract Labor		Wages	neuk ir Austin, 1A, unicentituer living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	t Office held
4 Date	5 Payee name			
07/13/2016	Timothy Bray		<b>_</b> .	
6 Amount \$675.00	<ul><li>7 Payee address;</li><li>4801 Placid Pl Austin, TX 787.</li></ul>	City; 31-5518	State:	Zip Code
8	(a) Category (See categories listed	at the top of this schoolule)	(b) Descrip	stion
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor		C⊩	eck if travel outside of Texas, complete Schedute T neck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name	· · ·		
07/21/2016	Timothy Bray			
6 Amount \$675.00	7 Payee address; 4801 Physid PL Austin TX 7873	City;	State:	Zip Code
	4801 Placid Pl Austin, TX 7873	JJJ10		
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	tion eck if travel outside of Texas, complete Schedule T
OF	Salaries/Wages/Contract Labor			eck if Austin, TX, officeholder living expense
EXPENDITURE			Wages	
			Office sought	Office held

### SCHEDULE F1

	EXPENDIT	URE CATEGORIES	FOR BOX 8	i(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
		de explains now to co		
1. Total pages Schedule F1:	2. FILER NAME Mrs Natalie Gauldin		3 File	er ID (Ethics Commission Filers)
4 Date	5 Payee name			
07/12/2016	Checkmark Typesetting			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$400.52				•
	3217 N Interstate 35 Austin, TX	K 78722-2203		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	btion
PURPOSE	Printing Expense			neck if travel outside of Texas, complete Schedule T neck if Austin, TX, officeholder living expense
EXPENDITURE			Printing	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	t Office held
4 Date	5 Payee name			
07/26/2016	Checkmark Typesetting			
6 Amount \$2,724.66	<ul> <li>7 Payee address;</li> <li>3217 N Interstate 35 Austin, TX</li> </ul>	City; ( 78722-2203	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Printing Expense	at the top of this schedule)		tion teck if travel outside of Texas, complete Schedule ∓ teck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name	· · · ·		
07/28/2016	Checkmark Typesetting			
6 Amount \$922.29	7 Payee address; 3217 N Interstate 35 Austin, TX	City;	State:	Zip Code
8				
° PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Printing Expense	at the top of this schedule)		tION neck if travel outside of Texas, complete Schedule T neck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE F1

	EXPENDI	FURE CATEGORIES	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1. Total pages Schedule F1:			· ·	ler ID (Ethics Commission Filers)
	Mrs Natalie Gauldin		<b>9</b> . 11	
4 Date	5 Payee name			
09/29/2016	Donateway			
6 Amount \$220.42	7 Payee address;	City;	State	Zip Code
	PO Box 301267 Austin, TX 78	703-0022		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Accounting/Banking	at the top of this schedule)		Dtion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense nation Commission Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name	·		·····
08/01/2016	Facebook Inc.			
6 Amount \$1.00	7 Payee address; 1601 Willow Rd Menlo Park, C	City; CA 94025-1452	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
08/01/2016	Facebook Inc.			
6 Amount \$50.02	7 Payee address; 1601 Willow Rd Menlo Park, C	City; CA 94025-1452	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
	ATTACH ADDITIONAL COP	PIES OF THIS SCHI	EDULE AS	NEEDED

### SCHEDULE F1

	EXPENDI	URE CATEGORIES	FOR BOX	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1. Total pages Schedule F1:				er ID (Ethics Commission Filers)
	Mrs Natalie Gauldin			
4 Date	5 Payee name			
08/18/2016	Facebook Inc.			
6 Amount \$25.05	7 Payee address;	City;	State:	Zip Code
N.	1601 Willow Rd Menlo Park, C	CA 94025-1452		
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	Dtion heck if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Advertising Expense		C Facebook a	heck if Austin, TX, officeholder living expense ds
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
09/01/2016	Facebook Inc.			
6 Amount \$132.23	7 Payee address; 1601 Willow Rd Menlo Park, C	City; CA 94025-1452	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
09/12/2016	Facebook Inc.			
6 Amount \$240.25	7 Payee address; 1601 Willow Rd Menlo Park, C	City; A 94025-1452	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense		Facebook ad	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	t Office held
		IES OF THIS SCH		NEEDED

### SCHEDULE F1

	EXPENDI	<b>TURE CATEGORIES</b>	FOR BOX	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1. Total pages Schedule F1:	2. FILER NAME		<u> </u>	er ID (Ethics Commission Filers)
	Mrs Natalie Gauldin		J. 11	
4 Date	5 Payee name			
09/12/2016	Facebook Inc.			
6 Amount \$9.85	7 Payee address;	City;	State:	Zip Code
	1601 Willow Rd Menlo Park, C	CA 94025-1452		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
EXPENDITORE			Facebook a	ds
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name	······································	•	
07/14/2016	Fedex			
6 Amount \$22.97	7 Payee address; 9222 Burnet Rd Ste 101 Austin	City; ., TX 78758-5251	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	al the top of this schedule)	<u> </u>	Dtion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense Diffice Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
07/14/2016	Fedex			
6 Amount \$3.24	7 Payee address; 9222 Burnet Rd Ste 101 Austin	City; , TX 78758-5251	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed ) Office Overhead/Rental Expense	at the top of this schedule)		otion neck if travel outside of Texas, complete Schedule T neck if Austin, TX, officeholder living expense Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
	ATTACH ADDITIONAL COP	IES OF THIS SCH	EDULE AS	NEEDED

•

### SCHEDULE F1

	EXPENDI	TURE CATEGORIES	FOR BOX	8(2)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1. Total pages Schedule F1:	2. FILER NAME		-	er ID (Ethics Commission Filers)
	Mrs Natalie Gauldin		5.11	
4 Date	5 Payee name			
07/14/2016	Fedex			
6 Amount \$2.15	7 Payee address;	City;	State:	Zip Code
	9222 Burnet Rd Ste 101 Austin	n, T <b>X 78758-5251</b>		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	l at the top of this schedule)		ption heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense Office Supplics
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
08/12/2016	Griffin Underwriting Services			
6 Amount \$971.25	<ul> <li>7 Payee address;</li> <li>PO Box 3867 Bellevue, WA 98</li> </ul>	City; 8009-3867	State	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)		btion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense Office Renters Insurance
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date 07/25/2016	5 Payee name HEB		_	
6 Amount \$31.74	<ul> <li>7 Payee address;</li> <li>12407 N Mo Pac Expy Austin,</li> </ul>	City: TX 78758-2475	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)		Dtion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense Materials For Campaign Office
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
	ATTACH ADDITIONAL COF	PIES OF THIS SCH	EDULE AS	NEEDED

### SCHEDULE F1

	EXPENDI	TURE CATEGORIES	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1. Total pages Schedule F1:	2. FILER NAME		· ·	ler ID (Ethics Commission Filers)
	Mrs Natalie Gauldin		J. FI	
4 Date	5 Payee name			
08/08/2016	Alex Jumeau			
6 Amount \$785.40	7 Payee address;	City;	State:	Zip Code
3785.40	811 E 11th St Apt 264 Austin,	TX 78702-1977		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor			heck if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
08/22/2016	Alex Jumeau			
6 Amount \$684.83	7 Payee address; 811 E 11th St Apt 264 Austin,	City; TX 78702-1977	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	(	ption heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	It Office held
4 Date	5 Payee name			
09/06/2016	Alex Jumeau			
6 Amount \$642.83	7 Payee address; 811 E 11th St Apt 264 Austin, 7	City; 1X 78702-1977	State	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)		Dtion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
	ATTACH ADDITIONAL COF	PIES OF THIS SCHI	EDULE AS	NEEDED

SCHEDULE F1

	EXPENDI	URE CATEGORIES	S FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr de explains how to ca	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1. Total pages Schedule F1:	2. FILER NAME		3. Fi	ler ID (Ethics Commission Filers)
	Mrs Natalie Gau <sup>1</sup> din			
4 Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·		
09/25/2016	Alex Jumeau			
6 Amount \$455.93	7 Payee address;	City;	State:	Zip Code
	811 E 11th St Apt 264 Austin,	TX 78702-1977		
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption heck if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Salaries/Wages/Contract Labor		Wages	heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
09/06/2016	McCallum Football Booster Cl	ub		
6 Amount \$150.00	<ul><li>7 Payee address;</li><li>4614 Shoal Creek Blvd Austin</li></ul>	City; Austin, TX 78756-291	State:	Zip Code
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ntion
PURPOSE				heck if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Advertising Expense			heck if Austin, TX, officeholder living expense Ad In Program
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
07/06/2016	NGP VAN		•	
6 Amount \$150.00	7 Payee address; 1101 15th St NW Ste 500 Wash	City; nington, DC 20005-500	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Accounting/Banking	at the top of this schedule)	C	Dtion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense Finance Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
	· · · · · · · · · · · · · · · · · · ·			

### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE F1

	EXPENDI	<b>FURE CATEGORIES</b>	FOR BOX	3(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1. Total pages Schedule F1:		· · · ·	· · ·	er ID (Ethics Commission Filers)
	Mrs Natalie Gauldin			
4 Date	5 Payee name		<u></u>	<u> </u>
08/01/2016	NGP VAN			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$16.28				
	1101 15th St NW Ste 500 Was	hington, DC 20005-500	)6	
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion
PURPOSE OF		,		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
EXPENDITURE	Accounting/Banking		Merchant F	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
08/02/2016	NGP VAN	<b>0</b>		
6 Amount \$150.00	7 Payee address; 1101 15th St NW Stc 500 Wash	City; hington, DC 20005-500	State: 6	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Accounting/Banking	at the top of this schedule)		otion neck if travel outside of Texas, complete Schedule T neck if Austin, TX, officeholder living expense inance Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
09/02/2016	NGP VAN			
6 Amount \$150.00	7 Payee address;	City;	State:	Zip Code
	1101 15th St NW Ste 500 Wash	iington, DC 20005-500	6	
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion
PURPOSE			ုိ ၂၀	eck if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Accounting/Banking			ieck if Austin, TX, officeholder living expense inance Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeliolder name		Office sought	Office held
	ATTACH ADDITIONAL COP	IES OF THIS SCHI	EDULE AS	NEEDED

### SCHEDULE F1

	EXPENDI	URE CATEGORIES	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1. Total pages Schedule F1:	2. FILER NAME		· · ·	ler ID (Ethics Commission Filers)
	Mrs Natalie Gauldin		0. 11	
4 Date	5 Payee name			
09/02/2016	NGP VAN			
6 Amount \$197.32	7 Payee address;	City;	State:	Zip Code
	1101 15th St NW Ste 500 Wash	hington, DC 20005-500	)6	
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	
PURPOSE OF	Accounting/Banking			Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
EXPENDITURE	g			nation Merchant Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
4 Date	5 Payee name			
07/25/2016	Office Depot			
6 Amount \$131.19	<ul><li>7 Payee address;</li><li>2620 W Anderson Ln Austin, 1</li></ul>	City;	State:	Zip Code
			<u> </u>	
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption Sheck if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Office Overhead/Rental Expense		1	Check if Austin, TX, officeholder living expense Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
4 Date	5 Payee name	50 <b>8</b> - 1		
08/29/2016	Office Depot			
6 Amount \$55.46	<ul> <li>7 Payee address;</li> <li>2620 W Anderson Ln Austin, T</li> </ul>	City; X 78757-1108	State:	Zip Code
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)		heck if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Office Overhead/Rental Expense			heck if Austin, TX, officeholder living expense Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	·	Office sough	t Office held
	ATTACH ADDITIONAL COP	IES OF THIS SCH	EDULE AS	NEEDED

### SCHEDULE F1

	EXPENDI	FURE CATEGORIES	FOR BOX	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense By Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1. Total pages Schedule F1:				ler ID (Ethics Commission Filers)
	Mrs Natalie Gautdin		5. 11	
4 Date	5 Payee name		ł	
09/20/2016	Office Depot			
6 Amount \$46.86	7 Payee address	City;	State:	Zip Code
	2620 W Anderson Ln Austin, 7	FX 78757-1108		
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)		heck if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Office Overhead/Rental Expense			heck if Austin, TX, officeholder living expense Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
07/05/2016	Office Max			
6 Amount \$125.60	<ul><li>7 Payee address;</li><li>10001 Research Blvd Ste 300 A</li></ul>	City; Austin, TX 78759-5800	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)		Dtion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			······
07/11/2016	Office Max			
6 Amount \$119.06	7 Payee address; 10001 Research Blvd Ste 300 A	City: Austin, TX 78759-5800	State:	Zip Code
		,		
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)		heck if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Office Overhead/Rental Expense			heck if Austin, TX, officeholder living expense Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
	ATTACH ADDITIONAL COP	IES OF THIS SCH	EDULE AS	NEEDED

### SCHEDULE F1

	EXPENDI	<b>FURE CATEGORIES</b>	FOR BOX 8	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
	2. FILER NAME		· ·	
T. Total pages Schedule FT.	Mrs Natalie Gauldin		3. FI	er ID (Ethics Commission Filers)
4 Date	5 Payee name			· · · · · · · · · · · · · · · · · · ·
07/18/2016	Parking Meter			
6 Amount \$2.70	7 Payee address;	City;	State:	Zip Code
	1111 Rio Grande St Austin, TX	\$ 78701-2015		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Travel In District	at the top of this schedule)		Dtion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name	······		
08/09/2016	Wesley Paulson			
6 Amount \$273.00	<ul><li>7 Payee address;</li><li>9301 Spectrum for Apt 2335 At</li></ul>	City; ustin, TX 78717-4135	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)		otion neck if travel outside of Texas, complete Schedule T neck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	d Office held
4 Date	5 Payee name			
08/26/2016	Wesley Paulson			
6 Amount \$56.00	<ul><li>7 Payee address;</li><li>9301 Spectrum Dr Apt 2335 Au</li></ul>	City: ustin, TX 78717-4135	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed ) Salaries/Wages/Contract Labor	at the top of this schedule)		tiON leck if travel outside of Texas, complete Schedule T leck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
	ATTACH ADDITIONAL COP	IES OF THIS SCH		NEEDED

### SCHEDULE F1

	EXPENDI	IURE CATEGORIES	FOR BOX	8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1. Total pages Schedule F1:		•		ler ID (Ethics Commission Filers)
	Mrs Natalie Gauldin		0	
4 Date	5 Pavee name		<u> </u>	
08/04/2016	Rein Consulting LLP			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$115.00	201 Tanglebriar A San Antoni	o, TX 78209		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Consulting Expense	at the top of this schedule)		heck if travel outside of Texas, complete Schedule T Sheck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name	<b>.</b>		
07/19/2016	Rock N Roll Rentals			
6 Amount \$20.57	<ul><li>7 Payee address;</li><li>8335 Burnet Rd Austin, TX 78</li></ul>	City; 757-7714	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Event Expense	at the top of this schedule)		ption heck if Iravel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense ipment Rental For Campaign Kickoff
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
08/05/2016	Joshua Sabik			
6 Amount \$528.83	<ul><li>7 Payee address;</li><li>7910 Gault St Apt 204 Austin, 7</li></ul>	City; TX 78757-8433	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)		Dtion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
	ATTACH ADDITIONAL COP	IES OF THIS SCH	EDULE AS	NEEDED

### SCHEDULE F1

	EXPENDIT	<b>URE CATEGORIES</b>	FOR BOX 8	k(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense By Gift/Awards/Memorials Expense Legal Services		act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
		de explains how to co		
1. Total pages Schedule F1:	2. FILER NAME Mrs Natalie Gauldin		3. File	er ID (Ethics Commission Filers)
4 Date 08/25/2016	5 Payee name Joshua Sabik			
6 Amount \$516.83	7 Payee address;	City;	State	Zip Code
	7910 Gault St Apt 204 Austin,	TX 78757-8433		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Sataries/Wages/Contract Labor	at the top of this schedule)		tion eck if travel outside of Texas, complete Schedule T eck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date 09/07/2016	5 Payee name Joshua Sabik			
6 Amount \$477.40	7 Payee address; 7910 Gault St Apt 204 Austin,	City; TX 78757-8433	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)		tion leck if travel outside of Texas, complete Schedule T leck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date 09/23/2016	5 Payee name Joshua Sabik			·····
5 Amount \$407.50	7 Payee address; 7910 Gault St Apt 204 Austin, 7	City; IX 78757-8433	State:	Zip Code
B PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Salaries/Wages/Contract Labor	at the top of this schedule)		tion eck if travel outside of Texas, complete Schedule T eck if Austin, TX, officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder name		Office sought	Office held

### SCHEDULE F1

	EXPENDI	<b>FURE CATEGORIES</b>	FOR BOX	β(a)
Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	-	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Credit Card Payment		de explains how to co	mplete this	form.
1. Total pages Schedule F1:	2. FILER NAME Mrs Natalie Gauldin		3. Fi	er ID (Ethics Commission Filers)
4 Date	5 Payee name		l <u></u>	
07/10/2016	Sir Speedy			
6 Amount \$31.47	7 Payee address;	City;	State	Zip Code
\$31.4 <i>1</i>	3818 Far West Blvd Ste 105 At	ustin, TX 78731-3050		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Printing Expense	at the top of this schedule)		ption heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
07/08/2016	Texas Democratic Party			
6 Amount \$1,200.00	7 Payee address; 1006 Lavaca St Suite 100 Austi	City; in, TX 78701-2331	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed OTHER (enter a category not listed			heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
08/24/2016	Time Warner Cable			
6 Amount \$365.83	7 Payee address; PO Box 60074 City Of Industry	City; /, CA 91716-0074	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Office Overhead/Rental Expense	at the top of this schedule)		otion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense Campaign Office
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
	ATTACH ADDITIONAL COP	IES OF THIS SCHI	EDULE AS	NEEDED

## SCHEDULE F1

	EXPENDI	<b>FURE CATEGORIES</b>	FOR BOX 8	(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District
Credit Card Payment	The Instruction Gui	de explains how to co		Other (enter a category not listed above) orm.
I. Total pages Schedule F1:	2. FILER NAME		3. File	er ID (Ethics Commission Filers)
	Mrs Natalic Gauldin			
Date	5 Payee name			
07/13/2016	United Steas Postal Service			
Amount \$141.00	7 Payee address;	City;	State:	Zip Code
	7700 Northcross Dr Austin, TX	378757-1715		
PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	tion leck if fravel outside of Texas, complete Schedule T
	Solicitation/Fundraising Expense			neck if Austin, TX, officeholder living expense mps For Campaign
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
Date	5 Payee name			
07/01/2016	UPS Store			
Amount \$4.33	7 Payee address; 3616 Far West Blvd Ste 117 Au	City; ustin, TX 78731-3198	State:	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Exponse	at the top of this schedule)	Cn 🗍	tion eck if travel outside of Texas, complete Schedute T eck if Austin, TX, officeholder living expense fTice Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
Date	5 Payee name			
07/21/2016	UPS Store			
Amount \$131.00	<ul><li>7 Payee address;</li><li>3616 Far West Blvd Ste 117 Au</li></ul>	City; 1stin, TX 78731-3198	State:	Zip Code
PURPOSE	(a) Category (See categories listed a	at the top of this schedule)	(b) Descript	tion eck if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Office Overhead/Rental Expense		Campaign PC	eck if Austin, TX, officeholder living expense O Box Rental
Complete ONLY if direct	Candidate/Officeholder name		Office sought	Office held

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Office Overhead/Rental Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Fees Polling Expense Consulting Expense Food/Beverage Expense Printing Expense Expense Contributions/Donations Made By Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Travel In District Candidate/Officeholder/Political Legal Services **Travel Out of District** Committee Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1. Total pages Schedule F1: 2. FILER NAME 3. Filer ID (Ethics Commission Filers) Mrs Natalie Gauldin 4 Date 5 Pavee name 08/16/2016 UPS Store 6 Amount 7 Payee address; City: State: Zip Code \$12.00 8760 Research Blvd Ste A Austin, TX 78758-9995 8 (b) Description Check if travel outside of Texas, complete Schedule T (a) Category (See categories listed at the top of this schedule) PURPOSE OF Check if Austin, TX, officeholder living expense Legal Services EXPENDITURE Notary For Filing Petition Signatures 9 Complete ONLY if direct Candidate/OfficeLolder name Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 08/16/2016 **UPS Store** 6 Amount 7 Pavee address: City; State: Zip Code \$15.00 8760 Research Blvd Ste A Austin, TX 78758-9995 8 (b) Description (a) Category (See categories listed at the top of this schedule) PURPOSE OF Check if Austin, TX, officeholder living expense Legal Services EXPENDITURE Notary For Filing Petition Signatures 9 Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH 4 Date 5 Payee name 09/22/2016 Walgreens 6 Amount 7 Payee address; City; State: Zip Code \$37.60 6812 N Lamar Blvd Austin, TX 78752-3506 8 (b) Description Check if travel outside of Texas, complete Schedule T (a) Category (See categories listed at the top of this schedule) PURPOSE ÔF Check if Austin, TX, officeholder living expense Solicitation/Fundraising Expense **EXPENDITURE** Postage Stamps For Campaign 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Forms provided by Texas Ethics Commission

expenditure to benefit C/OH

SCHEDULE F1

### SCHEDULE F1

	EXPENDI	<b>FURE CATEGORIES</b>	FOR BOX	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1. Total pages Schedule F1:		• • • • • • • • • • • • • • • • • • • •	· .	er ID (Ethics Commission Filers)
	Mrs Natalie Gauldin		0. 1 (	
4 Date	5 Payee name		<u></u>	
07/01/2016	Birk Wilkison			
6 Amount \$675.00	7 Payee address;	City;	State:	Zip Code
	301 Palomino PI Liberty Hill, 1	ГХ 78642-3910 🕔		
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrij	Dtion heck if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Salaries/Wages/Contract Labor		C Wages	heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	office held
4 Date	5 Payee name			
07/08/2016	Birk Wilkison			
6 Amount \$675.00	7 Payee address; 301 Palomino PI Liberty Hill, 1	City;	State:	Zip Code
8 PURPOSE	(a) Category (See categories listed		(b) Descrip	Dtion heck if travel outside of Texas, complete Schedule T
OF	Salaries/Wages/Contract Labor			heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
07/21/2016	Birk Wilkison			
6 Amount \$675.00	7 Payee address; 301 Palomino PI Liberty Hill, T	City; <sup>°</sup> X 78642-3910	State:	Zip Code
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	Dtion heck if travel outside of Texas, complete Schedule T
OF	Salarics/Wages/Contract Labor			heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	t Office held
	ATTACH ADDITIONAL COP	PIES OF THIS SCHI	EDULE AS	NEEDED

Forms provided by Texas Ethics Commission

1

### SCHEDULE F1

	EXPENDITURE CATE	GORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Office Overhe Fees Polling Expen Food/Beverage Expense Printing Expe y Gift/Awards/Memorials Expense Salaries/Wag Legal Services The Instruction Guide explains h	nse Transportation Equipment & Related Expense Expense res/Contract Labor Travel In District Travel Out of District Other (enter a category not listed above)
1. Total pages Schedule F1:	2. FILER NAME	3. Filer ID (Ethics Commission Filers)
	Mrs Natalie Gauldin	
4 Date	5 Payee name	
07/29/2016	Birk Wilkison	
6 Amount \$675.00	7 Payee address; City;	State: Zip Code
	301 Palomino Pl Liberty Hill, TX 78642-391	0
8	(a) Category (See categories listed at the top of this	schedule) (b) Description
PURPOSE	Salarics/Wages/Contract Labor	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
EXPENDITURE	Control wages Connact Labor	Wages
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
08/09/2016	Birk Wilkison	
6 Amount \$675.00	7 Payee address; City; 301 Palomino PI Liberty Hill, TX 78642-3916	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this s Salaries/Wages/Contract Labor	schedule) (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Wages
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
07/08/2016	Antonio Williams	
6 Amount \$210.00	7 Payee address; City; 5004 Golden Wheat Ln McKinney, TX 7507(	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this s Salaries/Wayes/Contract Labor	schedule) (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Wages
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE F1

	EXPENDI	URE CATEGORIES		o(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
1. Total pages Schedule F1:				er ID (Ethics Commission Filers)
	Mrs Natalie Gauldin			
4 Date	5 Payee name			
07/15/2016	Worley Printing			
6 Amount \$700.38	7 Payee address;	City;	State:	Zip Code
	3217 N Interstate 35 Austin, T3	K 78722-2203		
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	ntion neck if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Printing Expense		CI Printing	neck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	d Office held
4 Date	5 Payee name			
07/26/2016	Worley Printing			
6 Amount \$328.00	7 Payee address; 3217 N Interstate 35 Austin, T2	City; ( 78722-2203	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Printing Expense	at the top of this schedule)		tion neck if travel outside of Texas, complete Schedule T neck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			·
08/08/2016	Worley Printing			
6 Amount \$3,500.00	7 Payee address; 3217 N Interstate 35 Austin, TX	City;	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Printing Expense	at the top of this schedule)		tion eck if travel outside of Texas, complete Schedule T eck if Austin, TX, officeholder living expense

### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# SCHEDULE F1

	EXPENDIT	URE CATEGORIES	FOR BOX 8(a	)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services The Instruction Guid	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	Tr Ex Ict Labor Tr Tr Ot	olicitation/Fundraising Expense ansportation Equipment & Related expense avel In District avel Out of District her (enter a category not listed above) m.
1. Total pages Schedule F1:	2. FILER NAME Mrs Natalie Gauldin		3. Filer	ID (Ethics Commission Filers)
4 Date 09/07/2016	5 Payee name Worley Printing	_		_
6 Amount \$5,042.69	7 Payee address; 3217 N Interstate 35 Austin, TX	City; K 78722-2203	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Printing Expense	at the top of this schedule)		DN k if travel outside of Texas, complete Schedule T k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date 09/27/2016	5 Payee name Worley Printing			
6 Amount \$73.61	7 Payee address; 3217 N Interstate 35 Austin, TX	City; ( 78722-2203	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed) Printing Expense	at the top of this schedule)		n if travel outside of Texas, complete Schedule T k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

### 

### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# UNPAID INCURRED OBLIGATIONS

## SCHEDULE F2

	EXPENDI	TURE CATEGORIES	FOR BOX	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	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 G	Guide explains how to c	complete th	is form.
1. Total pages Schedule F2:	2. FILER NAME Mrs Natalie Gauldin		3. Fil	er ID (Ethics Commission Filers)
4. TOTAL OF UNITEMIZED	UNPAID INCURRED OBLIGA	TIONS		\$0.00
5 Date 08/18/2016	6 Payee name Donna Garcia Davidson		—. <b>I</b>	
7 Amount \$330.00	8 Payee address: PO Box 12131 Austin, TX 787	City: 11-2131	State:	Zip Code
9 TYPE OF EXPENDITURE	✓Political	]Non-Political	Not App	licable for Form PTY-CORP
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Legal Services	at the top of this schedule)		Clipck if travel outside of Texas, complete Schedule T UNUSED for DCE Check if Austin, TX, officeholder living expense Legal Services For Campaign
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(	Office sough	t Office held

### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED