

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 22
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>Ms.</b>	FIRST Mariana	MI
	NICKNAME	LAST Salazar	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	7611 Lazy Creek Drive		
	Austin, TX 78724		
	OFFICE USE ONLY		
			Date Received
			<b>OCC RECEIVED AT JUL 10 '18 PM 1:45</b>
			Date Hand-delivered or Date Postmarked
			Receipt #      Amount
			Date Processed
			Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR <b>Ms</b>	FIRST Mariana	MI
	NICKNAME	LAST Salazar	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;      CITY;      STATE;      ZIP CODE
	7611 Lazy Creek Drive Austin, TX 78724		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
		512 - 655 - 9616	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month      Day      Year	THROUGH	Month      Day      Year
	01/12/2018		06/30/2018
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month      Day      Year	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Runoff <input type="checkbox"/> Special <input checked="" type="checkbox"/> Other
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Austin City Council District 1

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

2 of 22

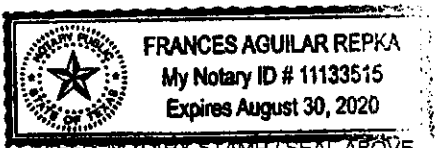
<b>13 C / OH NAME</b> Salazar, Mariana	<b>14 Filer ID</b>
--	--------------------

<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.								
<table border="1" style="width:100%"> <tr> <td style="width:20%"><b>COMMITTEE TYPE</b></td> <td><b>COMMITTEE NAME</b></td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td><b>COMMITTEE ADDRESS</b></td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td><b>COMMITTEE CAMPAIGN TREASURER NAME</b></td> </tr> <tr> <td></td> <td><b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b></td> </tr> </table>	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>	<input type="checkbox"/> SPECIFIC	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>	
	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>							
	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>							
	<input type="checkbox"/> SPECIFIC	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>							
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>								

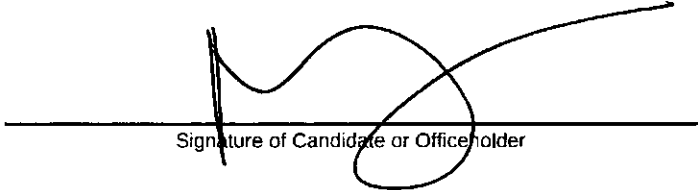
<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,035.22
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,308.74
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 4,657.15
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**17 AFFIDAVIT**

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

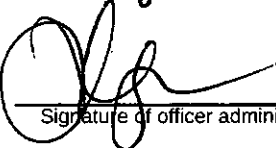


AFFIX NOTARY STAMP / SEAL ABOVE



Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Mariana Salazar, this the 6TH day of July, 20 18, to certify which, witness my hand and seal of office.



Signature of officer administering

Frances Aguilar Repka

Printed name of officer administering

Notary

Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Salazar, Mariana	<b>19 Filer ID</b>
--	--------------------

	20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,035.22
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 2,308.74
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/16 Rpt: 4/22
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 04/26/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Brian	<b>7</b> Amount of Contribution (\$)  \$105.58
<b>6</b> Contributor address; City; State; Zip Code 101 Herring Ave  Cranford, NJ 07016		
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) The Asia Group
Date 05/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armendariz, Daniel	Amount of Contribution (\$)  \$26.63
Contributor address; City; State; Zip Code 2710A Metcalfe Rd.  Austin, TX 78741		
Principal occupation / Job title (See Instructions) Housing Advocate		Employer (See Instructions) Austin Tenants Council
Date 05/12/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Ivonne	Amount of Contribution (\$)  \$105.58
Contributor address; City; State; Zip Code 16346 Ginger Run Way  Sugar Land, TX 77498		
Principal occupation / Job title (See Instructions) Legal assistant		Employer (See Instructions) Nguyen Legal Group Pc
Date 02/18/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Azene, Christina	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 1422 Martin St  Houston, TX 77018		
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Liberty Advisor Group
Date 04/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ball, Alina	Amount of Contribution (\$)  \$105.58
Contributor address; City; State; Zip Code 3100 College Ave  Berkeley, CA 94705		
Principal occupation / Job title (See Instructions) receptionist		Employer (See Instructions) Smith & Co

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/16 Rpt: 5/22
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 06/08/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bracho, Rossana	<b>7</b> Amount of Contribution (\$) \$26.63
<b>6</b> Contributor address; City; State; Zip Code 3251 Wall Blvd Apt 2007  Gretna, LA 70056		
<b>8</b> Principal occupation / Job title (See Instructions) Senior Accountant		<b>9</b> Employer (See Instructions) Pan-American Life Insurance Group
Date 04/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bracho, Rossana	Amount of Contribution (\$) \$26.63
Contributor address; City; State; Zip Code 3251 Wall Blvd Apt 2007  Gretna, LA 70056		
Principal occupation / Job title (See Instructions) Sr. Accountant		Employer (See Instructions) Pan-American Life Insurance Group
Date 06/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brick, Paul	Amount of Contribution (\$) \$52.95
Contributor address; City; State; Zip Code 7102 Chuck Wagon Trail  Austin, TX 78749		
Principal occupation / Job title (See Instructions) Private Investigator		Employer (See Instructions) Superior Investigating & Consulting
Date 04/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Budish, Elaine	Amount of Contribution (\$) \$52.95
Contributor address; City; State; Zip Code 363 Orms Street  Providence, RI 02908		
Principal occupation / Job title (See Instructions) Education Consultant		Employer (See Instructions) UPD
Date 01/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantele, Jacob	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2713 COTTONWOOD SHORES DR  AUSTIN, TX 78725		
Principal occupation / Job title (See Instructions) Chief Technology Officer		Employer (See Instructions) Merlin Labs

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/16 Rpt: 6/22
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 06/27/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carbajal Ravet, Teresa  <b>6</b> Contributor address; City; State; Zip Code 1081 Hidden Hills Drive  Dripping Springs, TX 78620	<b>7</b> Amount of Contribution (\$) \$21.37
<b>8</b> Principal occupation / Job title (See Instructions) Owner of Sententia Vera, LLC & SV Cultural Hub		<b>9</b> Employer (See Instructions) Self-employed
Date 04/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Nadia  Contributor address; City; State; Zip Code 4305 Avenue A #A Austin, TX 78751	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Community Housing Liaison		Employer (See Instructions) ECHO
Date 06/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colbert, Amanda  Contributor address; City; State; Zip Code 2900 Manior Road #2341  Austin, TX 78722	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Public Health		Employer (See Instructions) UT Austin
Date 06/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Comstock, Veronica  Contributor address; City; State; Zip Code 3103 Loyola Lane  Austin, TX 78723	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Comstock, Veronica  Contributor address; City; State; Zip Code 3103 Loyola Lane  Austin, TX 78723	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/16 Rpt: 7/22
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 01/16/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crookham, Chris <hr/> <b>6</b> Contributor address; City; State; Zip Code 6600 Ed Bluestein Blvd. #516  Austin, TX 78723	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Staff		<b>9</b> Employer (See Instructions) COA
Date 03/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Einaudi, Gian Paolo <hr/> Contributor address; City; State; Zip Code 77 Lincoln Avenue  Tuckahoe, NY 10707	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Director of Social Impact		Employer (See Instructions) The Resource Foundation
Date 02/18/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Folan, Anne <hr/> Contributor address; City; State; Zip Code 600 PRINCESS ANNE ST UNIT 651 FREDERICKSBRG, VA 22404-1430	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Anne Folan & Associates
Date 06/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Rita <hr/> Contributor address; City; State; Zip Code 1514 homewood circle  Round rock, TX 78665	Amount of Contribution (\$)  \$10.84
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) Tx Dept of Housing and Community Affairs
Date 03/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gehrman, Amber <hr/> Contributor address; City; State; Zip Code 6900 Bay City bend  Austin, TX 78725	Amount of Contribution (\$)  \$26.63
Principal occupation / Job title (See Instructions) Stay at home mom		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/16 Rpt: 8/22
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 06/27/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Claye <b>6</b> Contributor address; City; State; Zip Code 322 North Shore Drive Suite 200 Pittsburgh, PA 15212	<b>7</b> Amount of Contribution (\$) \$350.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Self
Date 04/19/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Taylor Contributor address; City; State; Zip Code 408 1/2 East Sul Ross Ave. Alpine, TX 79830	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Archaeologist		Employer (See Instructions) Center for Big Bend Studies
Date 01/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Gillian Contributor address; City; State; Zip Code 106 w oak ave Moorestown, NJ 08057	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Director of Strategic Planning and Outreach		Employer (See Instructions) Greater Philadelphia Area
Date 02/12/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henriquez, Andres Contributor address; City; State; Zip Code 15 Stuyvesant Oval New York, NY 10009	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Vice President of STEM Learning in Communities		Employer (See Instructions) New York Hall of Science
Date 04/20/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Mirian Contributor address; City; State; Zip Code 129- 189th Ave Richmond Hill, NY 11418	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/16 Rpt: 9/22
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 02/01/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heyes, Jim  <b>6</b> Contributor address; City; State; Zip Code 1231 Upland Drive #5612  Houston, TX 77043	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Managing Partner		<b>9</b> Employer (See Instructions) Criterion Africa Partners
Date 06/18/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Heather  Contributor address; City; State; Zip Code 5214 Eigel St Unit J Houston, TX 77007	Amount of Contribution (\$)  \$26.63
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Self-Employed
Date 03/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Honig, Daniel  Contributor address; City; State; Zip Code 1414 17th St NW Apt 700 Washington, DC 20036	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Assistant Professor at SAIS		Employer (See Instructions) Johns Hopkins University SAIS
Date 06/21/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, John  Contributor address; City; State; Zip Code 8537 Adirondack Trail  Austin, TX 78759	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Dell Inc.
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Thomas  Contributor address; City; State; Zip Code 176 Broadway #14B  New York, NY 10038	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Self-employed		Employer (See Instructions) Self-employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/16 Rpt: 10/22
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 06/22/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korn, Jen  <b>6</b> Contributor address; City; State; Zip Code 1720 Maple Avenue Unit 1810  Evanston, IL 60201	<b>7</b> Amount of Contribution (\$)  \$10.84
<b>8</b> Principal occupation / Job title (See Instructions) School		<b>9</b> Employer (See Instructions) School
Date 01/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leos-Urbel, Jacob  Contributor address; City; State; Zip Code 4001 Mission Street #1  San Francisco, CA 94112	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Stanford University
Date 04/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Li, Melody  Contributor address; City; State; Zip Code 2501 Winchell Lane  Austin, TX 78725	Amount of Contribution (\$)  \$52.95
Principal occupation / Job title (See Instructions) Co-Founder, Counselor, Couples Therapist		Employer (See Instructions) Austin Counseling Collective
Date 06/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Michelle  Contributor address; City; State; Zip Code 737 West Bartlett Drive  Buda, TX 78610	Amount of Contribution (\$)  \$26.63
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) mmlopez@austin.rr.com
Date 04/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mabbs, Allison  Contributor address; City; State; Zip Code 2200 Santa MarÃ-a St.  Austin, TX 78702	Amount of Contribution (\$)  \$5.58
Principal occupation / Job title (See Instructions) Coordinated Entry System Coordinator		Employer (See Instructions) ECHO

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/16 Rpt: 11/22
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 02/12/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacPherson, Christopher	<b>7</b> Amount of Contribution (\$) \$350.00
	<b>6</b> Contributor address; City; State; Zip Code 511 E 12th St Apt 5F  New York, NY 10009	
<b>8</b> Principal occupation / Job title (See Instructions) Associate Director, Applied Data & Intelligent Systems		<b>9</b> Employer (See Instructions) Frog
Date 05/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manganella, Katy	Amount of Contribution (\$) \$105.58
	Contributor address; City; State; Zip Code 2011 Hardy Circle  Austin, TX 78757	
Principal occupation / Job title (See Instructions) Public servant		Employer (See Instructions) ECHO
Date 01/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marrero, Marcos	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 27 Linden St.  Holyoke, MA 01040	
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) City of Holyoke
Date 06/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Judy	Amount of Contribution (\$) \$105.58
	Contributor address; City; State; Zip Code 12400 Willow Wild Drive  Austin, TX 78758	
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) ECHO
Date 02/18/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mengistu, Tewodaj	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2625 Piedmont Rd NE 56-120 Atlanta, GA 30324	
Principal occupation / Job title (See Instructions) Senior program officer		Employer (See Instructions) Gave

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/16 Rpt: 12/22
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 01/31/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mercado, Douglas <b>6</b> Contributor address; City; State; Zip Code 306 N 26th St. #211 Richmond, VA 23223	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Emergency Coordinator		<b>9</b> Employer (See Instructions) United Nations World Food Programme
Date 05/12/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Denise Contributor address; City; State; Zip Code 6500 Bay City Bend Austin, TX 78725	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Respiratory Therapist		Employer (See Instructions) Ascension Health
Date 06/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Misenheimer, Douglas Contributor address; City; State; Zip Code 746 Palo Duro Loop Round Rock, TX 78664	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Staff		Employer (See Instructions) County
Date 06/22/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Rosemary Contributor address; City; State; Zip Code 7004 Bay City Bend Austin, TX 78725	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/22/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Rosemary Contributor address; City; State; Zip Code 7004 Bay City Bend Austin, TX 78725	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 1 Sch: 10/16 Rpt: 13/22
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 04/22/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Rosemary <b>6</b> Contributor address; City; State; Zip Code 7004 Bay City Bend  Austin, TX 78725	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) N/A
Date 03/22/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Rosemary Contributor address; City; State; Zip Code 7004 Bay City Bend  Austin, TX 78725	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 02/22/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Rosemary Contributor address; City; State; Zip Code 7004 Bay City Bend  Austin, TX 78725	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 01/22/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Rosemary Contributor address; City; State; Zip Code 7004 Bay City Bend  Austin, TX 78725	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Retired
Date 06/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nye, Paul Contributor address; City; State; Zip Code 7522 Rio Pass  Austin, TX 78724	Amount of Contribution (\$)  \$26.63
Principal occupation / Job title (See Instructions) Visual Designer		Employer (See Instructions) Georgetown ISD

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/16 Rpt: 14/22
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 06/18/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ODonnell, Denis ODonnell  <b>6</b> Contributor address; City; State; Zip Code 4618 Depew Ave  Austin, TX 78751	<b>7</b> Amount of Contribution (\$)  \$105.58
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) The White Horse and Hard Luck Lounge
Date 02/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajan, Thu  Contributor address; City; State; Zip Code 4004 hunting pines ct  fairfax, VA 22032	Amount of Contribution (\$)  \$105.58
Principal occupation / Job title (See Instructions) Economic/Trade Officer		Employer (See Instructions) Us. Department of State
Date 03/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roldan, Carmen  Contributor address; City; State; Zip Code 2712 Cottonwood Shores Dr.  Austin, TX 78725	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) State Employee		Employer (See Instructions) State Government
Date 06/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubin, Alyssa  Contributor address; City; State; Zip Code 7522 Rio Pass  Austin, TX 78724	Amount of Contribution (\$)  \$26.63
Principal occupation / Job title (See Instructions) Public Health Program Specialist		Employer (See Instructions) TX Dept of State Health Services
Date 04/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Placido  Contributor address; City; State; Zip Code 2617 Kingsland Way  Austin, TX 78725	Amount of Contribution (\$)  \$5.58
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/16 Rpt: 15/22
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 03/22/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Raul  <b>6</b> Contributor address; City; State; Zip Code 5300 Brookdale Lane  Austin, TX 78723	<b>7</b> Amount of Contribution (\$)  \$26.63
<b>8</b> Principal occupation / Job title (See Instructions) Monitor		<b>9</b> Employer (See Instructions) Texas Department of Housing and Community Affairs
Date 03/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sananikone, Ousa  Contributor address; City; State; Zip Code 6115 11th Street North  Arlington, VA 22205	Amount of Contribution (\$)  \$105.58
Principal occupation / Job title (See Instructions) Senior Private Sector Development Specialist		Employer (See Instructions) World Bank Group
Date 01/20/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Mark  Contributor address; City; State; Zip Code P.O. Box 202466  Austin, TX 78720	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) State Employee		Employer (See Instructions) State Government
Date 06/19/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segura, Ruby  Contributor address; City; State; Zip Code 11215 South IH 35 Suite 110 Austin, TX 78747	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Coldwell Banker United, Realtors
Date 06/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sigala, Tomas  Contributor address; City; State; Zip Code 12311 Chelmsford Ave  El Paso, TX 79928	Amount of Contribution (\$)  \$52.95
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) ISD

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/16 Rpt: 16/22
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 05/02/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Carolyn <b>6</b> Contributor address; City; State; Zip Code 2123 Coats Cove  Austin, TX 78748	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Volunteer		<b>9</b> Employer (See Instructions) Americorps
Date 06/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soberon, Casey Contributor address; City; State; Zip Code 1215 W Slaughter Ln #526 Austin, TX 78748	Amount of Contribution (\$)  \$26.63
Principal occupation / Job title (See Instructions) CoC Coordinator		Employer (See Instructions) Ending Community Homelessness Coalition, Inc
Date 05/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Matthew Contributor address; City; State; Zip Code 10900 Opal trail  Austin, TX 78750	Amount of Contribution (\$)  \$26.63
Principal occupation / Job title (See Instructions) Landscaper		Employer (See Instructions) mts95gmc@gmail.com
Date 03/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tafoya, Simon Contributor address; City; State; Zip Code 1368 Mariposa  Denver, CO 80204	Amount of Contribution (\$)  \$26.63
Principal occupation / Job title (See Instructions) Director of Policy and Federal Relations		Employer (See Instructions) State of Colorado
Date 04/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tatkow, Abigail Contributor address; City; State; Zip Code 69 Pedernales  Austin, TX 78702	Amount of Contribution (\$)  \$52.95
Principal occupation / Job title (See Instructions) Community Housing Liaison		Employer (See Instructions) ECHO



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/16 Rpt: 17/22
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 06/27/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Christofer E.	<b>7</b> Amount of Contribution (\$)  \$52.95
	<b>6</b> Contributor address; City; State; Zip Code 2905 Inridge Dr.  Austin, TX 78745	
<b>8</b> Principal occupation / Job title (See Instructions) Stay-at-home-dad		<b>9</b> Employer (See Instructions) Self Employed
Date 06/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Karen	Amount of Contribution (\$)  \$105.58
	Contributor address; City; State; Zip Code 2205 Boneset Trail  Round Rock, TX 78665	
Principal occupation / Job title (See Instructions) Mortgage Loan Officer		Employer (See Instructions) Georgetown Mortgage
Date 06/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Treviño, Cristina Nicole	Amount of Contribution (\$)  \$210.84
	Contributor address; City; State; Zip Code 2513 Alleyton Cove  AUSTIN, TX 78725	
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) Self
Date 01/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valverde, Anna	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code 6812 Bay City Bend  Austin, TX 78725	
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) SAFE Alliance
Date 02/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vitanza, Glynis L.	Amount of Contribution (\$)  \$105.58
	Contributor address; City; State; Zip Code 4117 Mattie Street  Austin, TX 78723	
Principal occupation / Job title (See Instructions) State Employee		Employer (See Instructions) Texas Department of Housing and Community Affairs

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/16 Rpt: 18/22
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 02/24/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vue, Choua  <b>6</b> Contributor address; City; State; Zip Code 6333 N. Lakewood Ave 2N Chicago, IL 60660	<b>7</b> Amount of Contribution (\$)  \$52.95
<b>8</b> Principal occupation / Job title (See Instructions) Community Organizer		<b>9</b> Employer (See Instructions) Illinois Action for Children
Date 05/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Melissa  Contributor address; City; State; Zip Code 8400 Seminary Ridge Dr  Austin, TX 78745	Amount of Contribution (\$)  \$105.58
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) ECHO
Date 04/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willard, Andrew  Contributor address; City; State; Zip Code 6702 Isabelle dr  Austin, TX 78752	Amount of Contribution (\$)  \$52.95
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Foundation for the Homeless
Date 01/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wong, Amy  Contributor address; City; State; Zip Code 241 SE 94th Ave  Portland, OR 97216	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Financial Manager		Employer (See Instructions) Khalsa Pain Relief Clinic, P.C.
Date 01/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lunger, karen  Contributor address; City; State; Zip Code 250 venango trails  Mars, PA 16046	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Stay at home mom		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/16 Rpt: 19/22
2 FILER NAME Salazar, Mariana		3 Filer ID
4 Date 06/13/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) sieber, carter	7 Amount of Contribution (\$) \$52.95
6 Contributor address; City; State; Zip Code 1400 Tuffit Lane  Austin, TX 78753		
8 Principal occupation / Job title (See Instructions) Safety		9 Employer (See Instructions) State Government
Date 05/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wiggins, nina	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 4401 Mesquite Spring Cove  Austin, TX 78735		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Tx Dept of Housing & Community Affairs

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/3 Rpt: 20/22	<b>2</b> FILER NAME Salazar, Mariana	<b>3</b> Filer ID
<b>4</b> Date 04/09/2018	<b>5</b> Payee name Annies List	
<b>6</b> Amount (\$) \$15.00	<b>7</b> Payee address; City; State; Zip Code 630 W 34th St #302  Austin , TX 78705	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Training
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2018	Payee name DonateWay	
Amount (\$) \$349.61	Payee address; City; State; Zip Code P.O. Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation online payment processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/13/2018	Payee name Facebook	
Amount (\$) \$14.56	Payee address; City; State; Zip Code 300 W. Sixth St  Austin, TX 78701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook Ad
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/3 Rpt: 21/22	<b>2</b> FILER NAME Salazar, Mariana	<b>3</b> Filer ID
<b>4</b> Date 04/04/2018	<b>5</b> Payee name MatthewHooks.com	
<b>6</b> Amount (\$) \$990.00	<b>7</b> Payee address; City; State; Zip Code 305 Forsam Bend Austin  Austin, TX 78725	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign website
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held
Date 06/21/2018	Payee name Office Depot	
Amount (\$) \$27.25	Payee address; City; State; Zip Code 816 Tirado St  Austin, TX 78752	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Clipboards	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Clipboards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held
Date 05/24/2018	Payee name Texas Democratic Party	
Amount (\$) \$640.00	Payee address; City; State; Zip Code 1106 Lavaca, Ste 100  Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Solicitation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/3 Rpt: 22/22	<b>2</b> FILER NAME Salazar, Mariana	<b>3</b> Filer ID:
--	---	--------------------

<b>4</b> Date 05/30/2018	<b>5</b> Payee name USPS
-----------------------------	-----------------------------

<b>6</b> Amount (\$) \$41.00	<b>7</b> Payee address; City; State; Zip Code 900 Blackson Ave.  Austin, TX 78752
---------------------------------	--

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) P.O. Box for Mail	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense P.O. Box for Mail
---------------------------------	--	---

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 03/17/2018	Payee name Vistaprint
--------------------	--------------------------

Amount (\$) \$16.98	Payee address; City; State; Zip Code 275 Wyman Street  Waltham, MA 78724
------------------------	---

PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Cards
------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 06/01/2018	Payee name Worley Printing Co
--------------------	----------------------------------

Amount (\$) \$214.34	Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd,  Austin, TX 78722
-------------------------	---

PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Foldcards
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------