

# 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: 10
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mariana	OFFICE USE ONLY Date Received <b>OCC RECEIVED AT JAN 15 '19 PM 2:31</b>	
	NICKNAME LAST SUFFIX Salazar		
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		Date Hand-delivered or Date Postmarked
			Receipt # Amount
			Date Processed
			Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mariana		
	NICKNAME LAST SUFFIX Salazar		
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  <del>7611 Lazy Creek Dr</del> 7611 Lazy Creek Dr. Austin, TX 78724		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION 512 - 655 - 9616		
8 REPORT TYPE	<input checked="" 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 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    Month Day Year 12/03/2018    THROUGH    12/31/2018		
10 ELECTION	ELECTION DATE Month Day Year 12/11/2018		ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Austin City Council District 1

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# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

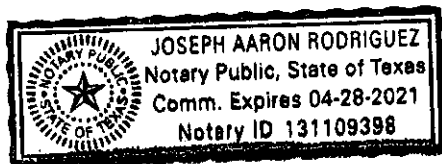
FORM C/OH  
COVER SHEET PG 2  
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13 C / OH NAME Salazar, Mariana	14 Filer ID
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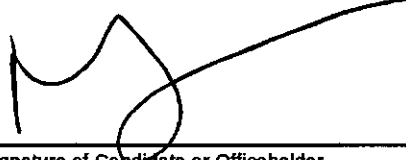
15 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input checked="" type="checkbox"/> GENERAL	VOTE PAC
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		3571 Far West Blvd PMB 149  Austin, TX 78731
	COMMITTEE CAMPAIGN TREASURER NAME	
	Kirkman, Jack	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	
	3571 Far West Blvd PMB 149  Austin, TX 78731	

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,935.16
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 12,086.49
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,322.48
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

## 17 AFFADAVIT



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

  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mariana Salazar, this the 15<sup>th</sup> day of January, 20 19, to certify which, witness my hand and seal of office.

  
Signature of officer administering

Joseph Rodriguez  
Printed name of officer administering

Public Notary  
Title of officer administering oath

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

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<b>18 FILER NAME</b> Salazar, Mariana		<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,935.16
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 12,086.49
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: 1/2 Rpt: 4/10
<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID
<b>4</b> Date 12/04/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, King <hr/> <b>6</b> Contributor address; City; State; Zip Code 1808 Kerr Street  Austin, TX 78704	<b>7</b> Amount of Contribution (\$)  \$105.58
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
<b>Date</b> 12/26/2018	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin, Flahive <hr/> <b>Contributor address; City; State; Zip Code</b> 100 Congress Avenue  Austin, TX 78701	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Lawyer		<b>Employer (See Instructions)</b> Armbrust & Brown, PLLC
<b>Date</b> 12/10/2018	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael, Garrison <hr/> <b>Contributor address; City; State; Zip Code</b> 2103 E 22nd St  Austin, TX 78722	<b>Amount of Contribution (\$)</b>  \$52.95
<b>Principal occupation / Job title (See Instructions)</b> Professor		<b>Employer (See Instructions)</b> UT
<b>Date</b> 12/09/2018	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, Johnson <hr/> <b>Contributor address; City; State; Zip Code</b> 2130 N St NW  Washington, DC 20037	<b>Amount of Contribution (\$)</b>  \$26.63
<b>Principal occupation / Job title (See Instructions)</b> Senior Director		<b>Employer (See Instructions)</b> rcjohnson01@gmail.com
<b>Date</b> 12/26/2018	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Shannon, Flahive <hr/> <b>Contributor address; City; State; Zip Code</b> 5010 Finley Drive  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> homemaker		<b>Employer (See Instructions)</b> none

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/10
2 FILER NAME Salazar, Mariana		3 Filer ID
4 Date 12/06/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOTE PAC, 6 Contributor address; City; State; Zip Code 3571 Far West Blvd PMB 149 Austin, TX 78731	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 12/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William, Reagan Contributor address; City; State; Zip Code 4311 Ravine Ridge Trail Austin, TX 78746	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Reagan Outdoor
Date 12/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) jose, salmeron Contributor address; City; State; Zip Code 11431 triola LN Houston, TX 77072	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Self

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 6/10		2 FILER NAME Salazar, Mariana		3 Filer ID	
4 Date 12/13/2018		5 Payee name Andrew Alemao			
6 Amount (\$) \$1,004.00		7 Payee address; City; State; Zip Code 3207 Stardust Dr.  Austin, TX 78757			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/13/2018		Payee name Andrew Alemao			
Amount (\$) \$250.00		Payee address; City; State; Zip Code 3207 Stardust Dr.  Austin, TX 78757			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/07/2018		Payee name Ashkan Jahangiri			
Amount (\$) \$1,750.00		Payee address; City; State; Zip Code 5606 N. Lamar Apt. 115  Austin, TX 78751			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/5 Rpt: 7/10		2 FILER NAME Salazar, Mariana		3 Filer ID
4 Date 12/13/2018		5 Payee name Ashkan Jahangiri		
6 Amount (\$) \$1,800.00		7 Payee address; City; State; Zip Code 5606 N. Lamar Apt. 115  Austin, TX 78751		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 12/31/2018		Payee name DonateWay		
Amount (\$) \$81.36		Payee address; City; State; Zip Code P.O. Box 301267  Austin, TX 78703		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 12/13/2018		Payee name Facebook		
Amount (\$) \$127.02		Payee address; City; State; Zip Code 300 W. Sixth St  Austin, TX 78701		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising 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 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: 4/5 Rpt: 9/10	<b>2</b> FILER NAME Salazar, Mariana	<b>3</b> Filer ID
<b>4</b> Date 12/13/2018	<b>5</b> Payee name Marco Garcia	
<b>6</b> Amount (\$) \$850.00	<b>7</b> Payee address; City; State; Zip Code 1402 Westmoor Dr.  Austin, TX 78723	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<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 Contract Labor
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/06/2018	Payee name Shea Mason-Kapoor	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 5451  Round Rock, TX 78683	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/06/2018	Payee name Worley Printing Co	
Amount (\$) \$3,825.02	Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd  Austin, TX 78722	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing and Mailing
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: 3/5 Rpt: 8/10		<b>2</b> FILER NAME Salazar, Mariana		<b>3</b> Filer ID	
<b>4</b> Date 12/04/2018		<b>5</b> Payee name Gaglers Inc., CallHub			
<b>6</b> Amount (\$) \$25.00		<b>7</b> Payee address: City; State; Zip Code 340 S Lemon Ave # 7468  Walnut, CA 91789			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Texting Platform		<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 Texting Platform	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
<b>Date</b> 12/14/2018		<b>Payee name</b> Gaglers Inc., CallHub			
<b>Amount (\$)</b> \$25.00		<b>Payee address; City; State; Zip Code</b> 340 S Lemon Ave # 7468  Walnut, CA 91789			
<b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Texting Platform		<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 Texting Platform	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
<b>Date</b> 12/12/2018		<b>Payee name</b> Jayce Waldrop			
<b>Amount (\$)</b> \$560.00		<b>Payee address; City; State; Zip Code</b> 2425 E Riverside Dr Apt 321  Austin, TX 78741			
<b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<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 Contract Labor	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 10/10		2 FILER NAME Salazar, Mariana		3 Filer ID
4 Date 12/11/2018		5 Payee name Worley Printing Co		
6 Amount (\$) \$242.48		7 Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd  Austin, TX 78722		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 12/13/2018		Payee name Worley Printing Co		
Amount (\$) \$178.61		Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd  Austin, TX 78722		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing and Mailing
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 12/13/2018		Payee name Zohair Dawoodally		
Amount (\$) \$368.00		Payee address; City; State; Zip Code 15054 Babbling Brook Dr.  Austin, TX 78728		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		