# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

### FORM COR-C/OH

1	Filer ID (Ethics Comm	nission Filers)	2 Total pages filed:	OFFICE USE ONLY		
3	CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Paige NICKNAME LAST Ellis	MI SUFFIX	Dale Received		
	ORIGINAL REPORT TYPE	30th day before election 15th app	off Other (specify)  eeded \$500 limit ———————————————————————————————————	OCC RECEIVED AT FEB 14'19 PM4:51  Date Hand-delivered or Date Postmarked  Receipt # Amount \$		
	ORIGINAL PERIOD COVERED	Month Day Year 12 / 02 / 18 TH	ROUGH $\frac{\text{Month}}{12 / 31 / 18}$	Date Processed  Date Imaged		
6	EXPLANATION OF CORRECTION  To amend contribution from Cross and Susan Moceri					
7	AFFIDAVIT	report is  Check O  Semiani made in	or affirm, under penalty of perjury, true and correct.  NLY if applicable:  nual reports: I swear, or affirm, the good faith and without an intent information contained in the repo	nat the original report was to mislead or to misrepre-		
100 S.	Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.  AFFIX NOTARY STAMP / SEAL ABOVE  Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.  Signature of Candidate or Officeholder					
	20 <u>19</u> , to certify	d before me, by the said Paige 6 which, witness my hand and seal of offic  Ale ministering cath  Printed		day of <u>February</u> ,  Votary  Title of officer administering oath		
,	Pemember To Attach Any Part Of The Campaign Finance Report Form					

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

## CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

**All Reports:** A filer who files a corrected report must submit a correction affidavit. The affidavit must identify the information that has changed.

Reports filed with Texas Ethics Commission: A corrected report (other than a report due 8 days before an election or a special report near election) filed with the Ethics Commission after its due date is not considered late for purposes of late-filing penalties if: (1) any error or omission in the report as originally filed was made in good faith, and (2) the person filing the report files a corrected report and a good-faith affidavit not later than the 14th business day after the date the person learns that the report as originally filed is inaccurate or incomplete.

**Semiannual Reports:** Effective September 1, 2011, a semiannual report (due January 15 or July 15) that is amended/corrected <u>before</u> the eighth day after the original report was filed is considered to have been filed on the date the original report was filed. A semiannual report that is amended/corrected <u>on or after</u> the eighth day after the original report was filed is considered to have been filed on the date the original report was filed if: (1) the amendment/correction is made before any complaint is filed with regard to the subject of the amendment/correction; and (2) the original report was made in good faith and without intent to mislead or misrepresent the information contained in the report.

Attach additional pages as necessary.

#### INSTRUCTIONS FOR COMPLETING THIS FORM

The following numbers correspond to the numbered boxes on the other side.

- **1. Filer ID.** If you file with the Ethics Commission, you should have received a letter acknowledging receipt of your campaign treasurer appointment and assigning you a Filer ID. Put that number in this box. If you do not file with the Ethics Commission, skip this box.
- 2. Total Pages Filed. After completing this form and any attachments, count the number of pages. Enter that number in this box. Each side of a two-sided form counts as a page. In other words, this form is two pages.
- 3. Candidate/Officeholder Name. Put your full name here. Enter your name in the same way as on the report you are correcting.
- 4. Original Report Type. Mark the type of report you are correcting.
- **5. Original Period Covered.** Enter the period covered by the report you are correcting. The year is important because filers sometimes correct reports years after filing the original.
- **6. Explanation of Correction.** Attach any part of the campaign finance report form needed to report and explain corrections. Explain why there was an error on the original report. Also explain what information is being corrected and how the new information is different from the information on the original report. (Use additional pages if you need more space.) You may also use this area to request a waiver or reduction of a late-filing penalty and state the basis of your request.
- **7. Affidavit.** Read the affidavit before signing. You must sign the affidavit in the presence of an individual authorized to take oaths. If signed before a notary public, the affidavit must include the notary's signature and seal.

## **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

## FORM C/OH **COVER SHEET PG 1**

The C/OH Instruction	Guide explains how to c	omplete this form.	1 Filer ID		2 Total pages fi	
				·	2	29
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST Paige		MI	OFFICE Date Received	USE ONLY
					000	RECEIVED AT
	NICKNAME	LAST Ellis		SUFFIX	FEB:	14'19 PM4:51
4 CANDIDATE /	ADDRESS / PO BOX;	APT / SUITE #; C	ITY;	ZIP CODE	Date Hand-delivered o	or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	P.O. Box 160233				Receipt #	Amount
Change of Address	Austin, TX 78716				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS/MRS/MR	FIRST		MI		ALC: W
TREASURER NAME	·	Ashley				
	NICKNAME	LAST		SUFFIX	***************************************	
		Bliss Lima				
6 CAMPAIGN	STREET ADDRESS (N	O PO BOX PLEASE)	; AP	T / SUITE #; CITY;	STA	ATE; ZIP CODE
TREASURER ADDRESS	2102 West 12th Stree	∍t				
(Residence or Business)	Austin, TX 78703					
	,					
7 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION		·	
TREASURER PHONE	(512)	693 - 873	31			
8 REPORT TYPE	X January 15	30th day befo	ore election	Runoff		mpaign treasurer
4 4	July 15	8th day befor	e election	Exceeded \$500 limit	appointment (offi	
9 PERIOD	1	'ear		Month Day	Year	
COVERED	12/02/2018		THROUGH	12/31/201	8	
10 ELECTION	ELECTION DA			ELECTION TYPE		
	Month Day	'ear 📗	Primary	Runoff	Other	
			General	Special		
11 OFFICE	OFFICE HELD (if any)	. <u> </u>	<del></del>	12 OFFICE SOUGHT	(if known)	
•	Austin City Council D	istrict 8				
<u></u>	<u> </u>				· · · · ·	
		GO	TO PAGE 2			
Forms provided by Te	exas Ethics Commissio	n www.	ethics.state.tx.t	is	Ver	sion V1.1.28ab615

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 29

				2 01 29			
13 C / OH NAME	Ellis, Paige		14 Filer ID				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	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.					
Additional Pages	COMMITTEE TYPE COMMITTEE NAME						
	GENERAL	4444444444					
·		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
16 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (OTHER T ARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	<b>\$</b> 715.29			
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	;)	<b>\$</b> 19,174.82			
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLESS	ITÉMIZED	<b>\$</b> 151.93			
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 77,168.64			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	AST DAY OF THE	\$ 3,606.44			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 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.  ALEJANDRO MEDINA Notary Public, State of Texas Comm. Expires 08-15-2022 Notary ID 131684514  Signature of Candidate or Officeholder							
	TARY STAMP / SEAL ABO						
Sworn to and subs	cribed before me, by the s. , 20 <u>19</u> , to ce	aid Paige Ellis ertify which, witness my hand and seal of office.	, this the	day			
Hand Signature of offi	M.L. cer administering	Alegando Medina Printed name of officer administering	Nota ( y Title of office	administering oath			

## **SUBTOTALS - C/OH**

## FORM COH **COVER SHEET PG 3**

	3 01 29
18 FILER NAME Ellis, Paige	19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTION	\$ 19,174.82
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL	CONTRIBUTIONS \$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM PO	\$ 77,168.64
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM	POLITICAL CONTRIBUTIONS \$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CA	\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PER	RSONAL FUNDS \$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBU	UTIONS TO A BUSINESS OF C/OH \$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM	POLITICAL CONTRIBUTIONS \$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS TO FILER	\$, AND CONTRIBUTIONS RETURNED

#### 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/19 Rpt: 4/29 3 Filer ID 2 FILER NAME Ellis, Paige Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$210.84 12/11/2018 Anderson, Cindy 6 Contributor address; City; State; Zip Code 1014 Harwood Place Austin, TX 78704 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Austin ISD Trustee At-Large Place 8 Full name of contributor out-of-state PAC (ID#:\_ Amount of Contribution (\$) Date 12/03/2018 \$350.00 Bailey, Kris Contributor address; City; State; Zip Code 5011 E Cesar Chavez Austin, TX 78702 Principal occupation / Job title (See Instructions) Employer (See Instructions) Electric Cab COO Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:\_ Date \$105.58 12/11/2018 Bowen, Joseph Contributor address; City; State; Zip Code 100 W 55th St Austin, TX 78751 Employer (See Instructions) Principal occupation / Job title (See Instructions) Instigator LLC Owner Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ 12/03/2018 \$100.00 Boyt, Jeb Contributor address; City; State; Zip Code 5423 Shoalwood Avenue Austin, TX 78756 Principal occupation / Job title (See Instructions) Employer (See Instructions) Texas Department of Insurance Attorney Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: \$52.95 12/11/2018 Buie, Jed Contributor address; City; State; Zip Code 7905 Goldenrod Cove Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions) Buie & Co. Public Relations PR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

#### SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/19 Rpt: 5/29 Filer ID FILER NAME Ellis, Paige Date Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: \$350.00 12/11/2018 Bynum, Grover 6 Contributor address; City; State; Zip Code PO Box 5782 Austin, TX 78763 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Self Employed Consultant Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#:\_ \$150.00 12/02/2018 Camarillo, Sylvia Contributor address; City; State; Zip Code 307 Cottonwood Lane Pflugerville, TX 78660 Employer (See Instructions) Principal occupation / Job title (See Instructions) **Texas Senate** Legislative Director Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$368.74 12/11/2018 Chen, John Contributor address; City; State; Zip Code 110 San Antonio St #1515 Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Employed Real Estate Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:\_ Date \$50.00 12/06/2018 Cole, Sheryl Contributor address; City; State; Zip Code 4101 Wildwood Rd Austin, TX 78722 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Representative Texas House of Representatives Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$350.00 12/11/2018 Coleman, Aan Contributor address; City; State; Zip Code 9890 Silver Mtn Dr Austin, TX 78737 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Coleman & Assoc Landscape Architect

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/19 Rpt: 6/29 3 Filer ID 2 FILER NAME Ellis, Paige Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$79.26 12/05/2018 Danburg, Debra Contributor address; City; State; Zip Code 3000 Cedarview Austin, TX 78704 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#; Amount of Contribution (\$) 12/11/2018 \$350.00 Denton, Brett Contributor address; City; State; Zip Code 12 Chapin Lane Austin, TX 78746 Principal occupation / Job title (See Instructions) Employer (See Instructions) Ardent Residential Real Estare Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$105.58 12/06/2018 Dochen, Sandy Contributor address; City; State; Zip Code 5010 North Rim Drive Austin, TX 78731 Employer (See Instructions) Principal occupation / Job title (See Instructions) **IMB** Manager Date Full name of contributor out-of-state PAC (ID#:\_ Amount of Contribution (\$) \$52.95 12/11/2018 Doyel, Elizabeth Contributor address; City; State; Zip Code 4209 Burnet Rd #102 Austin, TX 78756 Employer (See Instructions) Principal occupation / Job title (See Instructions) Consultant Self Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ \$350.00 12/11/2018 Eisman, Denise Contributor address; City; State; Zip Code 703 Caribou Ridge Trail Pflugerville, TX 78660 Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Employed Marketing Management

#### SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/19 Rpt: 7/29 Filer ID 2 FILER NAME Ellis, Paige Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$105.58 12/04/2018 Enriquez, Francisco Contributor address; City; State; Zip Code 1158 Brookswood Ave. Austin, TX 78721 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Glasshouse Policy **Public Policy** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 12/07/2018 \$105.58 Galindo, Cid Contributor address; City; State; Zip Code 411 Brazos St Ste 99 Austin, TX 78701 Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Employed Real Estate Amount of Contribution (\$) Full name of contributor ut-of-state PAC (ID#: Date \$52.95 12/02/2018 Garemko, Kelly Contributor address; City; State; Zip Code 9220 Edwardson Ln Austin, TX 78749 Employer (See Instructions) Principal occupation / Job title (See Instructions) **Fiduciary Administrator** Wells Fargo Amount of Contribution (\$) Date Full name of contributor ut-of-state PAC (ID#:\_ \$210.84 12/11/2018 Garza, Jesus Contributor address; City; State; Zip Code 5904 Quernus Cove Austin, TX 78735 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$210.84 12/11/2018 Garza, Jesus Contributor address; City; State; Zip Code 5904 Quernus Cove Austin, TX 78735 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired

#### SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/19 Rpt: 8/29 Filer ID 2 FILER NAME Ellis, Paige Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$52.95 12/11/2018 Gins, JD 6 Contributor address; City; State; Zip Code 2917 E 14th st Austin, TX 78702 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Texas Beer Company Brewer Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:\_ Date \$105.58 12/11/2018 Glassco, David Contributor address; City; State; Zip Code 425 Yaupon Valley Rd West Lake Hills, TX 78746 Principal occupation / Job title (See Instructions) Employer (See Instructions) daveglassco@mac.com investor Amount of Contribution (\$) out-of-state PAC (ID#:\_ Date Full name of contributor 12/11/2018 \$105.58 Goldsby, GRETA Contributor address; City; State; Zip Code 4412 Rosedale Ave. Austin, TX 78757 Employer (See Instructions) Principal occupation / Job title (See Instructions) **Drenner Group** Attorney Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ \$105.58 12/11/2018 Goldsby, Greta Contributor address; City; State; Zip Code 4412 Rosedale Ave. Austin, TX 78756 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Drenner Group** Attorney Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$52.95 12/11/2018 Graham, Lawrence Contributor address; City; State; Zip Code 5909 Bull Creek Road Austin, TX 78757 Employer (See Instructions) Principal occupation / Job title (See Instructions) Texas Gas Service Manager- Community Relations

#### SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/19 Rpt: 9/29 Filer ID 2 FILER NAME Ellis, Paige Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$105.58 12/11/2018 Haggard, Lauren Contributor address; City; State; Zip Code 6301 Walebridge Ln Austin, TX 78739 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$350.00 12/11/2018 Harutunian, Anne Contributor address; City; State; Zip Code PO Box 14487 Austin, TX 78761 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$350.00 12/11/2018 Harutunian, Shant Contributor address; City; State; Zip Code PO Box 14487 Austin, TX 78761 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#; \$350.00 12/11/2018 Harutunian, Tahooky Contributor address; City; State; Zip Code PO Box 14487 Austin, TX 78761 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$350.00 12/11/2018 Harutunian, Vigain Contributor address; City; State; Zip Code PO Box 14487 Austin, TX 78761 Employer (See Instructions) Principal occupation / Job title (See Instructions) Harutunian Engineering Mechanical Engineer

#### SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/19 Rpt: 10/29 Filer ID 2 FILER NAME Ellis, Paige Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$52.95 12/11/2018 Hecker, Marvin Contributor address; City; State; Zip Code 1319 Wilson Heights Dr. Austin, TX 78746 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$52.95 12/05/2018 Howard, Jeffrey Contributor address; City; State; Zip Code 5436 Moon Shadow Drive Austin, TX 78735 Employer (See Instructions) Principal occupation / Job title (See Instructions) Attorney McLean & Howard, LLP Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:\_ Date \$350.00 12/11/2018 Howard, John Contributor address; City; State; Zip Code 1812 West Avenue Apt 202 Austin, TX 78701 Employer (See Instructions) Principal occupation / Job title (See Instructions) Dell Attorney Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ \$210.84 12/12/2018 Hughes, Christopher Contributor address; City; State; Zip Code 111 Congress Ave 14th Floor Austin, TX 78731 Employer (See Instructions) Principal occupation / Job title (See Instructions) Husch Blackwell LLP Attorney Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$210.84 12/05/2018 Islam, Rashed Contributor address; City; State; Zip Code 11901 Palisades Pkwy Austin, TX 78732 Employer (See Instructions) Principal occupation / Job title (See Instructions) **HDR** Engineer

#### SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/19 Rpt: 11/29 Filer ID 2 FILER NAME Ellis, Paige Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$334.53 12/11/2018 James, Eisman Contributor address; City; State; Zip Code 703 Caribou Ridge Trail Pflugerville, TX 78660 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Federal Bureau Law Enforcement Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$350.00 12/11/2018 Janis, Pinnelli Contributor address; City; State; Zip Code P. O. Box 50038 Austin, TX 78763 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 12/11/2018 \$105.58 Johnson, Linda and David Contributor address; City; State; Zip Code 118 Post Oak Way San Antonio, TX 78230 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Employed Professor and Retired Physician Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$52.95 12/11/2018 Kristensen, John Contributor address; City; State; Zip Code 2413 Ocean Avenue Venice, CA 90291 Employer (See Instructions) Principal occupation / Job title (See Instructions) Kristensen Weisberg Trial Lawyer Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:\_ Date \$350.00 12/11/2018 Krusleski, Carren Contributor address; City; State; Zip Code 702 Madison Circle Hernando, MS 38632 Principal occupation / Job title (See Instructions) Employer (See Instructions) Claims Representative Cigna Version V1.1.28ab6150www.ethics.state.tx.us

Forms provided by Texas Ethics Commission

#### SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 9/19 Rpt: 12/29 Filer ID 2 FILER NAME Ellis, Paige Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$158.21 12/11/2018 Lambrecht, Ken 6 Contributor address; City; State; Zip Code 1115 W 7th St #M-1 Austin, TX 78703 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Planned Parenthood of Greater Texas CEO Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_\_\_ \$105.58 12/11/2018 Limon-Mercado, Dyana Contributor address; City; State; Zip Code 2100 Mimosa Dr Austin, TX 78745 Principal occupation / Job title (See Instructions) Employer (See Instructions) Planned parenthood Public affairs Amount of Contribution (\$) out-of-state PAC (ID#:\_ Date Full name of contributor \$350.00 12/11/2018 Lorenz, Sheridan Contributor address; City; State; Zip Code 3703 River Rd Austin, TX 78703 Employer (See Instructions) Principal occupation / Job title (See Instructions) Foundation advisor Self Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ \$350.00 12/11/2018 Luckie, Matthew Contributor address; City; State; Zip Code 3102 Highland Terrace West Austin, TX 78731 Principal occupation / Job title (See Instructions) **Employer (See Instructions) FBR MGMT** Manager Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ \$105.58 12/03/2018 Mangrum, Jessica Contributor address; City; State; Zip Code 2707 Mountain Laurel Drive Austin, TX 78703 Employer (See Instructions) Principal occupation / Job title (See Instructions) Thompson, Coe, Cousins & Irons, LLP attorney

#### SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 10/19 Rpt: 13/29 Filer ID FILER NAME Ellis, Paige Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$26.63 12/11/2018 McCabe, Jack 6 Contributor address; City; State; Zip Code 11805 Johnny Weismuller lane Austin, TX 78748 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 12/11/2018 \$26.63 McCabe, Jack Contributor address; City; State; Zip Code 11806 Johnny Weismuller lane Austin, TX 78748 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$26.63 12/11/2018 McCabe, Jack Contributor address; City; State; Zip Code 11807 Johnny Weismuller lane Austin, TX 78748 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ \$52.95 12/05/2018 McGee, Alyson Contributor address; City; State; Zip Code 2301 Sully Creek Dr Austin, TX 78748 Employer (See Instructions) Principal occupation / Job title (See Instructions) JBGoodwin REALTORS Sales & Leasing Manager Amount of Contribution (\$) out-of-state PAC (ID#:\_ Full name of contributor Date \$210.84 12/02/2018 McGuire, Ying Contributor address; City; State; Zip Code 6605 Beauford Dr Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Technology Integration Group** Vice President

#### SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 11/19 Rpt: 14/29 Filer ID 2 FILER NAME Ellis, Paige Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$52.95 12/11/2018 McLean, William 6 Contributor address; City; State; Zip Code 2402 Rockmoor Avenue Austin, TX 78703 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Attorney McLean & Howard, LLP Full name of contributor out-of-state PAC (ID#:\_ Amount of Contribution (\$) Date 12/11/2018 \$350.00 Meade, Manuel Contributor address; City; State; Zip Code 19822 Teller Blvd Spring, TX 77388 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$52.95 12/02/2018 Miracle, Virginia Contributor address; City; State; Zip Code 1703 Surrey Hill Dr Austin, TX 78746 Employer (See Instructions) Principal occupation / Job title (See Instructions) Chief Customer Officer Spredfast Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$350.00 12/07/2018 Moceri, Cross Contributor address; City; State; Zip Code 3100 Mckinnon St, Suite 250 Dallas, TX 75201 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Presidium Group Co-CEO Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#:\_ \$350.00 12/07/2018 Moceri, Susan Contributor address; City; State; Zip Code 3100 Mckinnon St, Suite 250 Dallas, TX 75201 Principal occupation / Job title (See Instructions) **Employer (See Instructions)**

#### SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 12/19 Rpt: 15/29 Filer ID FILER NAME Ellis, Paige Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$105.58 12/12/2018 Mullan, Peter Contributor address; City; State; Zip Code 1002 Shelley Ave Austin, TX 78703 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) Waller Creek Conservancy Non profit utive Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$350.00 12/10/2018 Nassour, Jimmy Contributor address; City; State; Zip Code 3839 Bee Cave rd #200 Austin, TX 78746 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Employed Attorney Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$350.00 12/04/2018 Nelson, Elizabeth Contributor address; City; State; Zip Code PO Box 300819 Austin, TX 78703 Employer (See Instructions) Principal occupation / Job title (See Instructions) N/A Policy Analyst Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$105.58 12/11/2018 Niland, Nona Contributor address; City; State; Zip Code 210 Lavaca St. 3005 Austin, TX 78701 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$105.58 12/11/2018 Niland, Nona Contributor address; City; State; Zip Code 210 Lavaca St. 3005 Austin, TX 78701 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired

#### SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 13/19 Rpt: 16/29 Filer ID FILER NAME Ellis, Paige Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$105.58 12/11/2018 Niland, Nona Contributor address; City; State; Zip Code 210 Lavaca St. 3005 Austin, TX 78701 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$52.95 12/11/2018 Ocanas, Gilberto Contributor address; City; State; Zip Code 13805 panorama drive Austin, TX 78732 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Public affairs Ocanas group Amount of Contribution (\$) Date Full name of contributor ut-of-state PAC (ID#: \$368.74 12/07/2018 Parsi, Shravan Contributor address; City; State; Zip Code 1 medical dr Austin, TX 78701 Employer (See Instructions) Principal occupation / Job title (See Instructions) Investor Self Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$350.00 12/11/2018 Pinnelli, Joseph F Contributor address; City; State; Zip Code P. O. Box 50038 Austin, TX 78763 Employer (See Instructions) Principal occupation / Job title (See Instructions) J Pinnelli Company LLC **General Contractor** Date Full name of contributor out-of-state PAC (ID#:\_ Amount of Contribution (\$) \$52.95 12/11/2018 RODELL, LEONARD Contributor address; City; State; Zip Code 6904 Pascal Court Austin, TX 78746 Employer (See Instructions) Principal occupation / Job title (See Instructions) real estate Year Forms provided by Texas Ethics Commission

#### SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 14/19 Rpt: 17/29 Filer ID 2 FILER NAME Ellis, Paige 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$350.00 12/04/2018 Reagan, William Contributor address; City; State; Zip Code 4311 Ravine Ridge Trail Austin, TX 78746 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) President Reagan Outdoor Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#:\_ \$350.00 12/11/2018 Reynolds, Kyyla Contributor address; City; State; Zip Code 1015 Francis Street Pasadena, TX 77506 Employer (See Instructions) Principal occupation / Job title (See Instructions) Homemaker Home Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$52.95 12/11/2018 Rodell, Debbie Contributor address; City; State; Zip Code 6904 Pascal Court Austin, TX 78746 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ \$52.95 12/07/2018 Savage, Stella Contributor address; City; State; Zip Code 1206 A Maple Austin, TX 78702 Employer (See Instructions) Principal occupation / Job title (See Instructions) Legislative Director State of Texas Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ \$52.95 12/11/2018 Scherz, Drew Contributor address; City; State; Zip Code 3120 Honey Tree Ln Austin, TX 78746 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired

#### SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 15/19 Rpt: 18/29 Filer ID FILER NAME Ellis, Paige Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$350.00 12/11/2018 Schoenbaum, Alan Contributor address; City; State; Zip Code 3112 Windsor Rd. Ste A #525 Austin, TX 78703 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Self Employed Lawyer Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 12/11/2018 \$105.58 Sesri, Marjorie Contributor address; City; State; Zip Code 124 Summit Drive Rochester, NY 14620 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** University of Rochester Curator Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$52.95 12/11/2018 Spearman, Joah Contributor address; City; State; Zip Code PO Box 6149 Austin, TX 78762 Employer (See Instructions) Principal occupation / Job title (See Instructions) Localeur Tech founder Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$263.47 12/04/2018 Stallings, Robin Contributor address; City; State; Zip Code 2208 Santa Rosa St Austin, TX 78702 Employer (See Instructions) Principal occupation / Job title (See Instructions) **BikeTexas Excutive Director** Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:\_ Date \$350.00 12/11/2018 Stanley, Alfred Contributor address; City; State; Zip Code 1409 Hardouin Ave Austin, TX 78703 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Employed Political consultant

	MONET	TARY POLITICAL CONTRIBUTION	ONS ·	SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 16/19 Rpt: 19/29	
2	FILER NAME Ellis, Paige	· ##		3 Filer ID	
4	Date 12/10/2018	<ul> <li>Full name of contributor out-of-state PAC (ID#:_ Tebcherany, Dina</li> <li>Contributor address; City; State; Zip Code 3839 Bee Cave rd #200</li> <li>Austin, TX 78746</li> </ul>		7 Amount of Contribution (\$)	\$349.26
8	Principal occu None	upation / Job title (See Instructions)	Employer (See Instructions)     None	)	
	Date 12/11/2018	Full name of contributor out-of-state PAC (ID#:_ Travillion, Jeffrey  Contributor address; City; State; Zip Code P. O. Box 2425  Austin, TX 78768		Amount of Contribution (\$)	\$263.47
	Principal occu Commission	upation / Job title (See Instructions) ner	Employer (See Instructions) Travis County		
-	Date 12/06/2018	Full name of contributor out-of-state PAC (ID#:_ Turner, Scott Contributor address; City; State; Zip Code 3201 Sunny Ln Austin, TX 78731		Amount of Contribution (\$)	\$350.00
	Principal occu Home builde	upation / Job title (See Instructions) er	Employer (See Instructions) Self Employed		
	Date 12/11/2018	Full name of contributor out-of-state PAC (ID#:_ University Democrats Contributor address; City; State; Zip Code 2408 Leon Street Austin, TX 78705	)	Amount of Contribution (\$)	\$184.53
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2018	Full name of contributor out-of-state PAC (ID#:_ Vanessa, Luckie Contributor address; City; State; Zip Code 3102 Highland Terrace West		Amount of Contribution (\$)	\$350.00
	Principal occu Whole Food	upation / Job title (See Instructions) Is	Employer (See Instructions) Contract Worker		
					1 30 hc15/

#### SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 17/19 Rpt: 20/29 3 Filer ID FILER NAME Ellis, Paige Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$350.00 12/11/2018 Villarreal, Massey 6 Contributor address; City; State; Zip Code 4515 Riley Way Ln Sugar Land, TX 77479 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) PTG President Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 12/11/2018 \$337.16 Vog, Wallace Contributor address; City; State; Zip Code 1805 graveyard point Austin, TX 78734 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$52.95 12/03/2018 Walker, Heyden Contributor address; City; State; Zip Code 208 W. 4th St., Ste. 3A Austin, TX 78701 Employer (See Instructions) Principal occupation / Job title (See Instructions) Black + Vernooy Urban Planner Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ \$52.95 12/11/2018 Walker, Nathaniel Contributor address; City; State; Zip Code 5506 Windward Dr Austin, TX 78723 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Blue Roots Strategies, Inc. Owner/lobbyist Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$52.95 12/03/2018 Walsh, Margaret r Contributor address; City; State; Zip Code 17531 Klamath falls drive Round Rock, TX 78681 Principal occupation / Job title (See Instructions) Employer (See Instructions) Meg Walsh consulting llc President

#### SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 18/19 Rpt: 21/29 2 FILER NAME Filer ID Ellis, Paige Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: \$200.00 12/04/2018 Walters, Warren Contributor address; City; State; Zip Code 2300 Barton Creek Blvd, Unit 44 Unit 44 Austin, TX 78735 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) W2 Real Estate Partners Real Estate Investor Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:\_ Date \$350.00 12/11/2018 Whatley, Melba Contributor address; City; State; Zip Code P.O. Box 5623 Austin, TX 78763 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Employed investor Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$60.00 12/11/2018 Whatley, Suzanne Contributor address; City; State; Zip Code Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ \$52.95 12/04/2018 Whitesides, Cindy Contributor address; City; State; Zip Code 8109 Via Verde Dr. Austin, TX 78739 Principal occupation / Job title (See Instructions) Employer (See Instructions) Southwest Austin Foot & Ankle Clinic **Practice Administrator** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ \$368.73 12/11/2018 Whitfield, Gail Contributor address; City; State; Zip Code 1520 Ben Ctenshaw #221 Austin, TX 78746 Employer (See Instructions) Principal occupation / Job title (See Instructions) The Whitfield Company Real estate

#### **MONETARY POLITICAL CONTRIBUTIONS** SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 19/19 Rpt: 22/29 3 Filer ID FILER NAME Ellis, Paige out-of-state PAC (ID#: Amount of Contribution (\$) Date 5 Full name of contributor \$350.00 12/11/2018 Whitfield, Marcus Contributor address; City; State; Zip Code 1101 South US Capital of Tx Hwy Suite A101 Austin, TX 78746 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Twc Agent Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 12/07/2018 ferguson, frances \$52.95 Contributor address; City; State; Zip Code 1013 harwood place Austin, TX 78704 Principal occupation / Job title (See Instructions) Employer (See Instructions) Affordable Central Texas **Board Memeber** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$105.58 12/11/2018 guerra, olivia Contributor address; City; State; Zip Code 4182 travis country cir Austin, TX 78735 Employer (See Instructions) Principal occupation / Job title (See Instructions) sugar mama's bakeshop owner Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ \$368.74 12/11/2018 hatch, tom Contributor address; City; State; Zip Code 1102 b east 8th street austin, TX 78702 Employer (See Instructions) Principal occupation / Job title (See Instructions) huo architects architect

## SCHEDULE F1

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)

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

	3.04.1 34.13.1 2y	The Instruction Guide explains how to comp	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID
	Sch: 1/7 Rpt: 23/29	Ellis, Paige		
4	Date	5 Payee name		-
•	12/05/2018	Actblue		
_		7 Payee address; City; State; Zip Code		
0	Amount (\$) \$230.00	366 Summer St	G	
	\$250.00	300 Summer St		
		Somerville, MA 02144		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Processing Fees
				, recessing, eac
•	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
3	expenditure to benefit C/Oł			Smoo nord
	Date	Payee name		
	12/04/2018	Actblue		
	Amount (\$)	Payee address; City; State; Zip Code	е	1
	\$272.27	366 Summer St		
	•			
		Somerville, MA 02144		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas, Complete Schedule T.
	EXFERENTIAL			Check if Austin, TX, officeholder living expense
				Processing Fees
		0,500		Office held
	Complete ONLY if direct expenditure to benefit C/OR	Candidate/Officeholder name Office sough	nt	Office field
	· · · · · · · · · · · · · · · · · · ·			
	Date	Payee name		
	12/11/2018	Actblue		
	Amount (\$)	Payee address; City; State; Zip Code	e	
	\$452.99	366 Summer St		
		Somerville, MA 02144		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Processing Fees
				rivessing rees
			la é	Office held
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	nτ	Office held
_		· · · · · · · · · · · · · · · · · · ·		
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### 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 t.oan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID
	Sch: 2/7 Rpt: 24/29	Ellis, Paige	
4	Date	5 Payee name	
	12/05/2018	Apodaca, Gabe	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$460.00	2301 Grove Blvd	
		#324	
	•	Austin, TX 78741	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense  Campaign organizing
			Campaign organizing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	A
	12/11/2018	Apodaca, Gabe	
	Amount (\$)	Payee address; City; State; Zip Code	·
	\$630.00	2301 Grove Blvd	
		#324	
		Austin, TX 78741	
	PURPOSE		Description
	OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Ĭ	Check if Austin, TX, officeholder living expense
			Campaign organizing
	O LA CAULY & divers	0	Office held
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office field
	Date	6	
	12/11/2018	Payee name Bumper Active	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$935.88	5907 Burnet Rd	
	4000.00	oper pamerna	
		Austin, TX 78757	
	PURPOSE		Description
	OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	The second dispersion of the second dispersion	Check if Austin, TX, officeholder living expense
			campaign printed materials
			Office hald
	Complete ONLY if direct expenditure to benefit C/OR	Candidate/Officeholder name Office sought	Office held
Ĺ.,	,		

## 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
Gitt/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide explains now to d	ompi	ete tnis form.
1	Total pages Schedule F1:	2 FILER NAME Ellis, Paige		3 Filer ID
4	Sch: 3/7 Rpt: 25/29  Date	5 Payee name		
ľ	12/25/2018	Constant Contact		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$21.32	1601 Trapelo Road		
		Waltham, MA 02451		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense
		·		Digitial Advertising
Ļ		0.514.705.4444.444		Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ugnt	Office field
-	Date	Payee name		****
	12/11/2018	Ellis, Paige		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$3,500.00	PO Box 160233		
		Austin TV 70716		•
	PURPOSE	Austin, TX 78716	(6)	Description
	OF	(a) Category (See Categories listed at the top of this schedule)  Loan Repayment/Reimbursement	(6)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Loan Repayment
	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	12/05/2018	Facebook		
	Amount (\$) \$750.00	Payee address; City; State; Zip C 1 Hacker Way	oue	
	Ψ100.00	I hacker view		
		Menlo Park, CA 94025		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		;		Online Advertising
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught	Office held
_	•			

### 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 Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Printing Expense
Salaries/Wages/Contract Labor

	Credit Card Payment		The Instruction Guide expl	ains how to co	mple	ete this form.	
1	Total pages Schedule F1:	2	FILER NAME			3 Filer ID	
	Sch: 4/7 Rpt: 26/29		Ellis, Paige				
4	Date	5	Payee name				
	12/10/2018		Facebook				
6	Amount (\$)	7	Payee address; City; S	State; Zip Co	de		
	\$305.00		1 Hacker Way				
			Menlo Park, CA 94025				
8	PURPOSE	(a)	Category (See Categories listed at the top of the	nis schedule)	(b)	Description	
	OF EXPENDITURE	.	Advertising Expense			Check if travel outside of Texas, Complete Schedule T.	
						Check if Austin, TX, officeholder living expense Online Advertising	
		1					
9	Complete ONLY if direct		andidate/Officeholder name	Office sou	ght	Office held	
	expenditure to benefit C/O	Н			_		
F	Date	Γ	Payee name				
	12/12/2018	1	Facebook				
	Amount (\$)	1	Payee address; City; S	State; Zip Co	de	<del></del>	
	\$11.90		1 Hacker Way	•			
			Menlo Park, CA 94025				
	PURPOSE	(a)	Category (See Categories listed at the top of the	nis schedule)	(b)	Description	
	OF EXPENDITURE	.	Advertising Expense			Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		1				Online Advertising	
						•	
	Complete ONLY if direct	С	andidate/Officeholder name	Office sou	ght	Office held	
	expenditure to benefit C/O	Н					
	Date		Payee name				
	12/04/2018		Hernandez, Laura				
	Amount (\$)		Payee address; City; S	State; Zip Co	de		
	\$1,875.00		6000 Lonesome Valley Trl				
		.	Austin, TX 78731				
	PURPOSE		Category (See Categories listed at the top of the	is schedule)	(b)	Description	
	OF EXPENDITURE		Consulting Expense			Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
						Fundraising	
$\vdash$	Complete ONLY if direct		andidate/Officeholder name	Office sou	ght	Office held	
	expenditure to benefit C/O				-	•	
$\vdash$							
1							

### 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 Git/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Polling Expense
Printing Expense
Sataries/Wages/Contract Labor

orean data r dymeni	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1: Sch: 5/7 Rpt: 27/29	2 FILER NAME Ellis, Paige	3 Filer ID
4 Date	<u> </u>	
12/11/2018	5 Payee name Hernandez, Laura	
6 Amount (\$) \$4,375.00	7 Payee address; City; State; Zip Co 6000 Lonesome Valley Trl	ode
	Austin, TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraising
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ight Office held
Date	Payee name	
12/21/2018	Kelly Graphics	
Amount (\$) \$8,259.28	Payee address; City; State; Zip Co 1409 Quaker Ridge	ode .
	Austin, TX 78746	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description  Check if travel outside of Texas, Complete Schedule T.  Check if Austin, TX, officeholder living expense  Printed materials
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ught Office held
Date 12/04/2018	Payee name Walker, Brittne	
Amount (\$) \$225.00	Payee address; City; State; Zip Co 3014 W William Cannon #1628 Austin, TX 78745	ode .
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Compliance
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught Office held

## 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)

order data raymon	The Instruction Guide explains how to	o complete this form.
1 Total pages Schedule I	F1: 2 FILER NAME	3 Filer ID
Sch: 6/7 Rpt: 28/29	9 Ellis, Paige	
4 Date	5 Payee name	
12/28/2018	Walker, Brittne	
6 Amount (\$)	7 Payee address; City; State; Zip	Code
\$250.	00 3014 W William Cannon	
	#1628	
	Austin, TX 78745	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Compliance
9 Complete ONLY if dire		sought Office held
expenditure to benefit (	C/OH	
Date	Payee name	
12/11/2018	Wix.com	
Amount (\$)	Payee address; City; State; Zip	Code
\$17.	50 2601 Mission Street	
		<u>.</u> .
	San Francisco, CA 94110	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Processing Fees
Complete ONLY if direct expenditure to benefit (		sought Office held
expenditure to benefit t	JOH	
Date	Payee name	
12/21/2018	Y-Strategy	
Amount (\$)	Payee address; City; State; Zip	Code
\$16,271.		
	Suite H	
	Austin, TX 78703	I
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Consulting Expense	Check if Austin, TX, officeholder living expense
		Direct Mail and Field Consulting
Complete ONLY if dire		sought Office held
expenditure to benefit (	C/OR	
		*

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#### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services  The Instruction Guide	Salaries/	Wages/Contract Labor	OTHER (enter a cate	ory not listed above)
_				explains non to co	ompiete this form:	Ta =" .=	
1	Total pages Schedule F1:					3 Filer ID	
	Sch: 7/7 Rpt: 29/29	Ellis, Paige	)				
4	Date	5 Payee name	•				
	12/10/2018	Y-Strategy					
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode		
	\$38,174.54	3110 Mano		, 1			
	<del>+</del> + + + + + + + + + + + + + + + + + +	Suite H					
			70700				
		Austin, TX	78703				
8	PURPOSE	(a) Category (S	See Categories listed at the top	p of this schedule)	(b) Description		
	OF EXPENDITURE	Consulting	Expense			l outside of Texas. Complete	
				in, TX, officeholder living expe and Field Consulting			
					Direct Mail a	ind Field Consulting	
_					<u> </u>		
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Off	ficeholder name	Office sou	ught	Office held	
	•						
				•			
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