

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090470		2 Total pages filed: 58	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Morgan		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/04/2020		
	NICKNAME LAST SUFFIX Witt				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 4025 Duval Rd Apt 2127 AUSTIN, TX 78759			Date Hand-delivered or Date Postmarked	
				Receipt # Amount	
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Morgan				
	NICKNAME LAST SUFFIX Witt				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4025 Duval Rd Apt 2127 AUSTIN, TX 78759				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 525-0787				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 THROUGH Month Day Year 07/01/2020 09/24/2020				
10 ELECTION	ELECTION DATE Month Day Year 11/03/2020		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME	Witt, Morgan	14 Filer ID	(Ethics Commission Filers)
		00090470	

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. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 15,505.20
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 160.37
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,635.57
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 14,776.63
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,500.00

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.

Morgan Witt

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering Printed name of officer administering Title of officer administering oath

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

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18 FILER NAME Witt, Morgan		19 Filer ID (Ethics Commission Filers) 00090470
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 13,912.20
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,593.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 2,500.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,635.57
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/31 Rpt: 4/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/17/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aldrich, Alma <hr/> 6 Contributor address; City; State; Zip Code 2205 Pasadena Dr Austin, TX 78757	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Apple Inc
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, Andrew <hr/> Contributor address; City; State; Zip Code 1308 Hardouin Ave. Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) N/A
Date 07/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Greg <hr/> Contributor address; City; State; Zip Code 3625 S 1st 121 Austin, TX 78704	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Director of Operations		Employer (See Instructions) Austin Habitat for Humanity
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Cathy <hr/> Contributor address; City; State; Zip Code 940 E 52nd Street Austin, TX 78751	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Austin Community College
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avard, Karl <hr/> Contributor address; City; State; Zip Code 1414 South Lamar Blvd Apt 467 Austin, TX 78704	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Senior Technical Project Manager		Employer (See Instructions) Civitas Learning

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/31 Rpt: 5/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/21/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Brent 6 Contributor address; City; State; Zip Code 605 Deep Eddy Ave Austin, TX 78703	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Brent Contributor address; City; State; Zip Code 605 Deep Eddy Ave Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Caroline Contributor address; City; State; Zip Code 800 W 38th St Apt 11304 Austin, TX 78705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Hazard Mitigation Planner		Employer (See Instructions) GrantWorks Inc.
Date 09/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Jenny Contributor address; City; State; Zip Code 605 Deep Eddy Ave. Austin, TX 78703	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Jenny Contributor address; City; State; Zip Code 605 Deep Eddy Ave. Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/31 Rpt: 6/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/30/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banahan, Katie <hr/> 6 Contributor address; City; State; Zip Code 4303 Shoalwood Ave Austin, TX 78756	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Content Writer		9 Employer (See Instructions) Civitas Learning
Date 08/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beasley, Sheila <hr/> Contributor address; City; State; Zip Code 1115 Spring Oak Way Cumming, GA 30041	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Corporate Trainor		Employer (See Instructions) LNRS
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Christopher <hr/> Contributor address; City; State; Zip Code 2014 Tramson Dr Austin, TX 78741	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Civitas Learning
Date 08/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Christopher <hr/> Contributor address; City; State; Zip Code 2014 Tramson Drive Austin, TX 78741	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Civitas Learning
Date 09/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bettac, Chad <hr/> Contributor address; City; State; Zip Code 1008 Banyon Street Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Halfaker

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/31 Rpt: 7/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/08/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bettac, Chad <hr/> 6 Contributor address; City; State; Zip Code 1008 Banyon St Austin, TX 78757	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Halfaker
Date 07/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Tanner <hr/> Contributor address; City; State; Zip Code 8603 Winding Walk Austin, TX 78757	Amount of Contribution (\$) \$375.00
Principal occupation / Job title (See Instructions) Systems Engineer		Employer (See Instructions) NI
Date 07/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Tanner <hr/> Contributor address; City; State; Zip Code 8603 Winding Walk Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NI
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanchard, Dustin <hr/> Contributor address; City; State; Zip Code 1000 E 5th St Apt 655 Austin, TX 78702	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) CarServ
Date 09/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyt, Jeb <hr/> Contributor address; City; State; Zip Code 5423 Shoalwood Austin, TX 78756	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Department of Insurance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/31 Rpt: 8/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/07/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandenburg, Kollin <hr/> 6 Contributor address; City; State; Zip Code 1813 RICHWOOD DR Austin, TX 78757	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) KW
Date 07/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bray, Timothy <hr/> Contributor address; City; State; Zip Code 4801 Placid Place Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brickell, James <hr/> Contributor address; City; State; Zip Code 4911 W. Cuyler Ave. #2 Chicago, IL 60641	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Operations		Employer (See Instructions) United Airlines
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brickell, Mary-Claire <hr/> Contributor address; City; State; Zip Code 13311 Kimberley Ln Houston, TX 77079	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Harris County
Date 09/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burleigh, Carl <hr/> Contributor address; City; State; Zip Code 800 Sparrow Cove Georgetown, TX 78626	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sourcing Specialist		Employer (See Instructions) Mercaterra Atlantic LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/31 Rpt: 9/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Kathy <hr/> 6 Contributor address; City; State; Zip Code 2207 stonehaven san marcos, TX 78666	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Kathy <hr/> Contributor address; City; State; Zip Code 2207 stonehaven San Marcos, TX 78666	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Kathy <hr/> Contributor address; City; State; Zip Code 2207 stonehaven san marcos, TX 78666	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Celko, Joe <hr/> Contributor address; City; State; Zip Code 4301 Kilgore Lane Austin, TX 78727	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colver, Mitchell <hr/> Contributor address; City; State; Zip Code 153 S 1450 E Hyrum, UT 84319	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Utah State University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/31 Rpt: 10/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 07/16/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crossley, Jay <hr/> 6 Contributor address; City; State; Zip Code 1010 Romeria B Austin, TX 78757	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Nonprofit		9 Employer (See Instructions) Farm&City
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennis, Austin <hr/> Contributor address; City; State; Zip Code 2111 E 22nd St Austin, TX 78722	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Product manager		Employer (See Instructions) Visa
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denton, Rachel <hr/> Contributor address; City; State; Zip Code 4900 E. Oltorf St Austin, TX 78741	Amount of Contribution (\$) \$375.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Atlassian
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denton, Rachel <hr/> Contributor address; City; State; Zip Code 910 Austin Highlands Blvd. Austin, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Atlassian
Date 09/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derengowski, Anna <hr/> Contributor address; City; State; Zip Code 5505 William Holland Ave Apt A Austin, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) software developer		Employer (See Instructions) Dun & Bradstreet

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/31 Rpt: 11/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/17/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derengowski, Anna <hr/> 6 Contributor address; City; State; Zip Code 5505 William Holland Ave Apt A Austin, TX 78756	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) software developer		9 Employer (See Instructions) Dun & Bradstreet
Date 07/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diana, Brent <hr/> Contributor address; City; State; Zip Code 5313 Apple Orchard Ln Austin, TX 78744	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Business Intelligence Analyst		Employer (See Instructions) Indeed
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ensign, Derek <hr/> Contributor address; City; State; Zip Code 4710 Santa Anna St Austin, TX 78721	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Data Modeler		Employer (See Instructions) Accenture
Date 08/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estrada, David <hr/> Contributor address; City; State; Zip Code 11606 Hidden Quail Dr Austin, TX 78758	Amount of Contribution (\$) \$120.20
Principal occupation / Job title (See Instructions) Systems Analyst		Employer (See Instructions) Apple
Date 08/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finn, Julia <hr/> Contributor address; City; State; Zip Code 1732 Dapplegrey Ln Austin, TX 78727	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Purchasing		Employer (See Instructions) City of Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/31 Rpt: 12/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friis, Gregory <hr/> 6 Contributor address; City; State; Zip Code 3101 S Lamar Blvd Apt 1524 Austin, TX 78704	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) H-E-B
Date 07/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friis, Gregory <hr/> Contributor address; City; State; Zip Code 3101 S Lamar Blvd Apt 1524 Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) H-E-B
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisby, Claire <hr/> Contributor address; City; State; Zip Code 7604 Wildcat Pass Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Marketing Operations		Employer (See Instructions) Indeed
Date 07/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilcrease, Pete <hr/> Contributor address; City; State; Zip Code 108 E 48th St Austin, TX 78751	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 07/26/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goff, Eric <hr/> Contributor address; City; State; Zip Code 1003 Jewell St Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Reliant

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/31 Rpt: 13/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/11/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Julio <hr/> 6 Contributor address; City; State; Zip Code 2614 Delwood Place Austin, TX 78703	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Charm		9 Employer (See Instructions) Executive
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Sara <hr/> Contributor address; City; State; Zip Code 5400 Roosevelt Ave Apt B Austin, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) software analyst		Employer (See Instructions) University of Texas at Austin
Date 08/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorse, Michael <hr/> Contributor address; City; State; Zip Code 1510 W North Loop BLVD #126 Austin, TX 78756	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) software engineer		Employer (See Instructions) SUSE LLC
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Brennan <hr/> Contributor address; City; State; Zip Code 7105 Gunnison Pass Austin, TX 78724	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Nonprofit manager		Employer (See Instructions) Texas Appleseed
Date 07/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halprin, Elizabeth <hr/> Contributor address; City; State; Zip Code 1406 North Street Unit B Austin, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) Foundation Communities

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/31 Rpt: 14/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 07/31/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanna, Jeffrey <hr/> 6 Contributor address; City; State; Zip Code 5106 north Lamar Blvd apt 262 Austin, TX 78751	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Priscila <hr/> Contributor address; City; State; Zip Code 2000 Cullen Ave #6-27 Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) archives		Employer (See Instructions) state of TX
Date 09/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horning-Rao, Meredith <hr/> Contributor address; City; State; Zip Code 2211 W North Loop Blvd Apt 235 Austin, TX 78756	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Customer Success Manager		Employer (See Instructions) Civitas Learning
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins, Kyle <hr/> Contributor address; City; State; Zip Code 115 Sandra Muraida Way Apartment 323 Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Apex Process Consultants
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huckabee, Alex <hr/> Contributor address; City; State; Zip Code 123 Main St. Austin, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Engineering

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/31 Rpt: 15/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/11/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Ashley <hr/> 6 Contributor address; City; State; Zip Code 7602 GLENHILL CV Austin, TX 78752	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Realty Austin
Date 09/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Heidi <hr/> Contributor address; City; State; Zip Code 7607 Gault St Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kellison, Lucy <hr/> Contributor address; City; State; Zip Code 1118 West 10th St Apt C Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Customer Success Manager		Employer (See Instructions) Civitas Learning
Date 07/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keshet, Dan <hr/> Contributor address; City; State; Zip Code 908 Nueces St. 22 Austin, TX 78701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) Qcue Inc
Date 09/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khamsi, Tymon <hr/> Contributor address; City; State; Zip Code 1405 Clifford Ave Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Graduate Student Assistant		Employer (See Instructions) UT Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/31 Rpt: 16/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/10/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim, Dustin 6 Contributor address; City; State; Zip Code 911 Banyon St Austin, TX 78757	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Actuary		9 Employer (See Instructions) Rudd and Wisdom
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knapp, Steven Contributor address; City; State; Zip Code 7013 St Johns Circle Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Mamabird Co.
Date 07/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koch, Kelsey Contributor address; City; State; Zip Code 1909 Rockland Drive Austin, TX 78748	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Customer Support		Employer (See Instructions) TEA
Date 08/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lam, Linda Contributor address; City; State; Zip Code 11613 Prairie Hen Ln Austin, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Maple Bear Bucheon
Date 09/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lavender, Karl Contributor address; City; State; Zip Code 9121 Ipswich Bay Drive Austin, TX 78747	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Production Support		Employer (See Instructions) AT&T

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/31 Rpt: 17/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/17/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lavender, Karl <hr/> 6 Contributor address; City; State; Zip Code 9121 Ipswich Bay Drive Austin, TX 78747	7 Amount of Contribution (\$) \$199.00
8 Principal occupation / Job title (See Instructions) Production Support		9 Employer (See Instructions) AT&T
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loomis, Andrew <hr/> Contributor address; City; State; Zip Code 1111 Perry Rd Austin, TX 78721	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) UT-Austin		Employer (See Instructions) Senior Software Developer
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marphatia, Anand <hr/> Contributor address; City; State; Zip Code 4631 Miramar Drive League City, TX 77573	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Felicity <hr/> Contributor address; City; State; Zip Code 2121 Melridge Pl Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) fibercove
Date 08/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Felicity <hr/> Contributor address; City; State; Zip Code 2121 Melridge Pl Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) fibercove

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/31 Rpt: 18/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/06/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarley, Maureen <hr/> 6 Contributor address; City; State; Zip Code 2816 Calle de Cordoba Fairfield, CA 94534	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarley, Maureen <hr/> Contributor address; City; State; Zip Code 2816 Calle de Cordoba Fairfield, CA 94534	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McRae, Jordan <hr/> Contributor address; City; State; Zip Code 4646 Mueller Boulevard Apt 2074 Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Whole Foods Market
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Kevin <hr/> Contributor address; City; State; Zip Code 12323 Tomanet Trl Austin, TX 78758	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Training developer		Employer (See Instructions) Apple Inc.
Date 07/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mott, Jenny <hr/> Contributor address; City; State; Zip Code 8524 Burnet Rd Apt 823 Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) admin		Employer (See Instructions) ut austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/31 Rpt: 19/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathanson-Flowers, Eric <hr/> 6 Contributor address; City; State; Zip Code 6817 Willamette Dr Austin, TX 78723	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Box
Date 09/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathanson-Flowers, Eric <hr/> Contributor address; City; State; Zip Code 6817 Willamette Dr Austin, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Box
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathanson-Flowers, H <hr/> Contributor address; City; State; Zip Code 6817 Willamette Dr Austin, TX 78723	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Box
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathanson-Flowers, H <hr/> Contributor address; City; State; Zip Code 6817 Willamette Dr Austin, TX 78723	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Box
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Meara, Caroline <hr/> Contributor address; City; State; Zip Code 1204 West Saint Johns avenue Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) business analyay		Employer (See Instructions) Tokyo electron

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/31 Rpt: 20/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/06/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONeal, Jen <hr/> 6 Contributor address; City; State; Zip Code 1216 Doonesbury Dr Austin, TX 78758	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) community organizer		9 Employer (See Instructions) Feeding Texas
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padilla, Leslie <hr/> Contributor address; City; State; Zip Code 621 Valverde Drive SW Albuquerque, NM 87108	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) PNM Resources
Date 07/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Madelyn <hr/> Contributor address; City; State; Zip Code 15026 Eves Necklace Ct Cypress, TX 77433	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Learning Coordinator		Employer (See Instructions) Bp
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Prachi <hr/> Contributor address; City; State; Zip Code 5206 Huisache Street Apt B Austin, TX 78751	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) Austin Water
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poteet, Brian <hr/> Contributor address; City; State; Zip Code 5608 Avenue F Apt. 135 Austin, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) National Instruments

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/31 Rpt: 21/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/19/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poteet, Brian <hr/> 6 Contributor address; City; State; Zip Code 5608 Avenue F Apt. 135 Austin, TX 78751	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) National Instruments
Date 07/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poteet, Brian <hr/> Contributor address; City; State; Zip Code 5608 Avenue F Austin, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) National Instruments
Date 07/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Devin <hr/> Contributor address; City; State; Zip Code 606 Upson St Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Web Developer		Employer (See Instructions) Universal Yums
Date 07/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Elizabeth <hr/> Contributor address; City; State; Zip Code 2114 Barr St Unit D Houston, TX 77080	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pustejovsky, Mary <hr/> Contributor address; City; State; Zip Code 7325 Wolverine St Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Salesforce

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/31 Rpt: 22/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Qadri, Zohaib <hr/> 6 Contributor address; City; State; Zip Code 91 Rainey St. Apt. 138 Austin, TX 78701	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Regional Director		9 Employer (See Instructions) DigiDems
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quist, Kevin <hr/> Contributor address; City; State; Zip Code 8519 Sweet Melissa Dr Katy, TX 77494	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reaume, Gayle <hr/> Contributor address; City; State; Zip Code 900 E 51st St Apt 111 Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reid, Sonja <hr/> Contributor address; City; State; Zip Code 5310 Joe Sayers Ave. #108 Austin, TX 78756	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Exhibition Coordinator		Employer (See Instructions) University of Texas at Austin
Date 09/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riegel, Daniel <hr/> Contributor address; City; State; Zip Code 500 E Riverside Dr Unit 228 Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Richards Rodriguez & Skeith

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/31 Rpt: 23/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 07/28/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Chris <hr/> 6 Contributor address; City; State; Zip Code 1310 San Antonio St. Apt. 1 Austin, TX 78701	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rafael <hr/> Contributor address; City; State; Zip Code 2819 Foster Lane Apt 149 Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Draftsman		Employer (See Instructions) CobbFendley
Date 08/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Clendon <hr/> Contributor address; City; State; Zip Code 1501 Barton Springs Rd Apt 234 Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Inside Texas
Date 07/27/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Clendon <hr/> Contributor address; City; State; Zip Code 1501 Barton Springs Rd Apt 234 Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Inside Texas
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Kelsey <hr/> Contributor address; City; State; Zip Code 900A Karen Ave Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Landscape Designer		Employer (See Instructions) Asakura Robinson

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/31 Rpt: 24/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 07/16/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, Andrea <hr/> 6 Contributor address; City; State; Zip Code 112 Sam Houston Drive Bastrop, TX 78602	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scarborough, Alix <hr/> Contributor address; City; State; Zip Code 7309 Wolverine Street Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Steer
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schell, Lindsey <hr/> Contributor address; City; State; Zip Code 2733 Dulce Ln 623 Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Customer success		Employer (See Instructions) Abilitie
Date 07/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schell, Lindsey <hr/> Contributor address; City; State; Zip Code 2733 Dulce Ln Unit 623 Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Customer Success		Employer (See Instructions) Abilitie
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seal, Melissa <hr/> Contributor address; City; State; Zip Code 6901 Colombia Drive Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) GlobalLogic

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/31 Rpt: 25/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/10/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shade, Randi <hr/> 6 Contributor address; City; State; Zip Code 1822 W. 10th St. Austin, TX 78703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharp, Susan <hr/> Contributor address; City; State; Zip Code 1507 North St Unit H Austin, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Grants		Employer (See Instructions) TPWD
Date 09/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelton, Benjamin <hr/> Contributor address; City; State; Zip Code 8408 Stillwood Lane Austin, TX 78757	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Intel
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Sarah <hr/> Contributor address; City; State; Zip Code 711 Patterson ace Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) self employed
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Emily <hr/> Contributor address; City; State; Zip Code 1600 West Avenue Unit 3 Austin, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Public Information Specialist		Employer (See Instructions) City of Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/31 Rpt: 26/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/18/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Paul <hr/> 6 Contributor address; City; State; Zip Code 7801 Shoal Creek Boulevard Apt 228 Austin, TX 78757	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Fitness Professional		9 Employer (See Instructions) Lake Austin Spa Resort
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Paul <hr/> Contributor address; City; State; Zip Code 7801 Shoal Creek Boulevard Apt 228 Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Fitness Professional		Employer (See Instructions) Lake Austin Spa Resort
Date 07/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sofranko, Sonya <hr/> Contributor address; City; State; Zip Code 6719 Fairfield Houston, TX 77023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Somers, Susan <hr/> Contributor address; City; State; Zip Code 11900 Hobby Horse Ct. Apt. 1228 Austin, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Senior Academic Advisor		Employer (See Instructions) The University of Texas at Austin
Date 08/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Somers, Susan <hr/> Contributor address; City; State; Zip Code 11900 Hobby Horse Ct. Apt. 1228 Austin, TX 78758	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Senior Academic Advisor		Employer (See Instructions) The University of Texas at Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/31 Rpt: 27/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/25/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson, Josiah <hr/> 6 Contributor address; City; State; Zip Code 1200 N Garfield St Apt 720 Arlington, VA 22201	7 Amount of Contribution (\$) \$375.00
8 Principal occupation / Job title (See Instructions) Senior Analyst		9 Employer (See Instructions) Capital One Services LLC
Date 07/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson, Josiah <hr/> Contributor address; City; State; Zip Code 1200 N Garfield St Apt 720 Arlington, VA 22201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Business analyst		Employer (See Instructions) Capital One Services LLC
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stites, Charles <hr/> Contributor address; City; State; Zip Code 904 Silver Quail Ln Austin, TX 78758	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Civil Rights Specialist		Employer (See Instructions) TX Dept. HHS
Date 08/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stratton, James <hr/> Contributor address; City; State; Zip Code 5004 Grover Avenue Austin, TX 78756	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stratton, James <hr/> Contributor address; City; State; Zip Code 5004 Grover Avenue Austin, TX 78756	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/31 Rpt: 28/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/15/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suddaby, Benjamin <hr/> 6 Contributor address; City; State; Zip Code 1807 Perez Street Austin, TX 78721	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Call Center		9 Employer (See Instructions) Travis County
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Summerlott, Lee <hr/> Contributor address; City; State; Zip Code 15650 Indian Head Ct Ramona, CA 92065	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Tennis pro		Employer (See Instructions) Self-employed
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swallow, Sarah <hr/> Contributor address; City; State; Zip Code 1501 North Loop Blvd Apt 110 Austin, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Actuary		Employer (See Instructions) Health and Human Services Commission
Date 09/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, May <hr/> Contributor address; City; State; Zip Code 1909 McCloskey St Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) psychologist		Employer (See Instructions) Austin Child Guidance Center
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Russell <hr/> Contributor address; City; State; Zip Code 1905 Rainy Meadows Dr Austin, TX 78758	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Geographer		Employer (See Instructions) CoreLogic

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/31 Rpt: 29/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/16/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Russell <hr/> 6 Contributor address; City; State; Zip Code 1905 Rainy Meadows Dr Austin, TX 78758	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Geographer		9 Employer (See Instructions) CoreLogic
Date 07/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Russell <hr/> Contributor address; City; State; Zip Code 1905 Rainy Meadows Dr Austin, TX 78758	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Geographer		Employer (See Instructions) CoreLogic
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tristan, Sergio <hr/> Contributor address; City; State; Zip Code 1817 Pasadena Drive Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Military Department
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Scott <hr/> Contributor address; City; State; Zip Code 3201 Sunny Ln Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Home builder		Employer (See Instructions) self
Date 08/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urban, Andrew <hr/> Contributor address; City; State; Zip Code 3908 Greenmountain Lane Austin, TX 78759	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) Sr Dir Mkt Dev		Employer (See Instructions) Zuri Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/31 Rpt: 30/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/18/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ved, Nirav <hr/> 6 Contributor address; City; State; Zip Code 2408 Century Park Blvd Austin, TX 78727	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Transportation Planner		9 Employer (See Instructions) CAMPO
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ved, Nirav <hr/> Contributor address; City; State; Zip Code 2408 Century Park Blvd Austin, TX 78727	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Transportation Planner		Employer (See Instructions) CAMPO
Date 09/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vela, Chito <hr/> Contributor address; City; State; Zip Code 1407 Ridgemont Drive Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Walker Gates Vela PLLC
Date 09/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Javier <hr/> Contributor address; City; State; Zip Code 3702 Gable Dr Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Senior Software Developer		Employer (See Instructions) Applied Research Laboratories
Date 08/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vladyka, Claire <hr/> Contributor address; City; State; Zip Code 11900 Stonehollow Dr # A-314 Austin, TX 78758	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Application admin		Employer (See Instructions) Capital Metro

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/31 Rpt: 31/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/06/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vu, Erin 6 Contributor address; City; State; Zip Code 2609 Melba Pass Cedar Park, TX 78613	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Corporate Trainer		9 Employer (See Instructions) D&S Global Solutions
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vu, Erin Contributor address; City; State; Zip Code 2609 Melba Pass Cedar Park, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Corporate Trainer		Employer (See Instructions) D&S Global Solutions
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Katharine Contributor address; City; State; Zip Code 3200 Pinecrest Dr Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Bazaarvoice
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wald, Tom Contributor address; City; State; Zip Code 4016 Maplewood Ave Austin, TX 78722	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Event Coordinator		Employer (See Instructions) BikeTexas
Date 08/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walton, Kurt Contributor address; City; State; Zip Code 1110 Byers Ln Austin, TX 78753	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Tech Lead		Employer (See Instructions) Milestone Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/31 Rpt: 32/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Phil <hr/> 6 Contributor address; City; State; Zip Code 6503 Auburnhill Austin, TX 78723	7 Amount of Contribution (\$) \$27.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) Orange Cone Agency
Date 07/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wharton, Stephanie <hr/> Contributor address; City; State; Zip Code 1125 Salem Park Ct Austin, TX 78745	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Recruiter		Employer (See Instructions) Qualia
Date 08/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Aaron <hr/> Contributor address; City; State; Zip Code 2504 Barhill Dr Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Favor
Date 08/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitworth, David <hr/> Contributor address; City; State; Zip Code 303 E 42nd St Austin, TX 78751	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Infill Home Builder		Employer (See Instructions) Self
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiley, Maria <hr/> Contributor address; City; State; Zip Code 1802 San Gabriel Austin, TX 78701	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/31 Rpt: 33/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/22/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiley, Philip <hr/> 6 Contributor address; City; State; Zip Code 1802 San Gabriel St. Austin, TX 78701	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wimberley, Liza <hr/> Contributor address; City; State; Zip Code 4810 Shoal Creek Blvd Austin, TX 78756	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witt, Kertis and Marilyn <hr/> Contributor address; City; State; Zip Code 2211 Stonehaven San Marcos, TX 78666	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witt, Kertis and Marilyn <hr/> Contributor address; City; State; Zip Code 2211 Stonehaven San Marcos, TX 78666	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witt, Kertis and Marilyn <hr/> Contributor address; City; State; Zip Code 2211 Stonehaven San Marcos, TX 78666	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/31 Rpt: 34/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 Date 07/16/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witt, Kertis and Marilyn <hr/> 6 Contributor address; City; State; Zip Code 2211 Stonehaven San Marcos, TX 78666	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witt, Paula <hr/> Contributor address; City; State; Zip Code 12800 Hunters Chase Dr Austin, TX 78729	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Enumerator		Employer (See Instructions) US Census Bureau
Date 08/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witt, Paula <hr/> Contributor address; City; State; Zip Code 12800 Hunters Chase Dr Austin, TX 78729	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Enumerator		Employer (See Instructions) Census Bureau

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 1/1 Rpt: 35/58	
2 FILER NAME Witt, Morgan				3 Filer ID (Ethics Commission Filers) 00090470	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 08/01/2020	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Bernadette		8 Amount of contribution (\$) \$400.00		9 In-kind contribution description Photography
7 Contributor address; City; State; Zip Code 9801 Stonelake Blvd #1126 Austin, TX 78759		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Axe Throwing Coach			11 Employer (FOR NON-JUDICIAL) (See instructions) Urban Axes		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 08/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diana, Brent and Rebecca		Amount of contribution (\$) \$793.00		In-kind contribution description Web Development
Contributor address; City; State; Zip Code 5313 Apple Orchard Ln Austin, TX 78744		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Business Intelligence Analyst/Unemployed			Employer (FOR NON-JUDICIAL) (See instructions) Indeed/Unemployed		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 08/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Rourke, Matthew		Amount of contribution (\$) \$400.00		In-kind contribution description Graphic Design
Contributor address; City; State; Zip Code 707 Dale Dr San Marcos, TX 78666		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Senior Art Director			Employer (FOR NON-JUDICIAL) (See instructions) Civitas Learning		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 36/58
2 FILER NAME Witt, Morgan		3 Filer ID (Ethics Commission Filers) 00090470
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 09/24/2020	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Witt, Morgan	9 Loan Amount (\$) \$2,500.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 4025 Duval Rd Apt 2127 Austin, TX 78759	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions) Bilingual Education Advisor		13 Employer (See Instructions) LexisNexis Risk Solutions
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

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: 1/22 Rpt: 37/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 07/15/2020	5 Payee name ACTBlue	
6 Amount (\$) \$2.63	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/16/2020	Candidate/Officeholder name Office sought Office held	
Payee name ACTBlue		
Amount (\$) \$14.03	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/17/2020	Candidate/Officeholder name Office sought Office held	
Payee name ACTBlue		
Amount (\$) \$2.03	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/22 Rpt: 38/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 07/19/2020	5 Payee name ACTBlue	
6 Amount (\$) \$0.38	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/22/2020	Candidate/Officeholder name Office sought Office held	
Payee name ACTBlue		
Amount (\$) \$1.50	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/24/2020	Candidate/Officeholder name Office sought Office held	
Payee name ACTBlue		
Amount (\$) \$6.15	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/22 Rpt: 39/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 07/25/2020	5 Payee name ACTBlue	
6 Amount (\$) \$0.75	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/26/2020	Payee name ACTBlue	
Amount (\$) \$0.75	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/27/2020	Payee name ACTBlue	
Amount (\$) \$0.38	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/22 Rpt: 40/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 07/28/2020	5 Payee name ACTBlue	
6 Amount (\$) \$0.75	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/30/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$0.38	Payee name ACTBlue Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/31/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$5.85	Payee name ACTBlue Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/22 Rpt: 41/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/03/2020	5 Payee name ACTBlue	
6 Amount (\$) \$6.00	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/06/2020	Payee name ACTBlue	
Amount (\$) \$9.77	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/07/2020	Payee name ACTBlue	
Amount (\$) \$5.19	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/22 Rpt: 42/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/08/2020	5 Payee name ACTBlue	
6 Amount (\$) \$3.15	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/09/2020	Candidate/Officeholder name Office sought Office held	
Payee name ACTBlue		
Amount (\$) \$9.00	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/10/2020	Candidate/Officeholder name Office sought Office held	
Payee name ACTBlue		
Amount (\$) \$0.38	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/22 Rpt: 43/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/11/2020	5 Payee name ACTBlue	
6 Amount (\$) \$0.76	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/12/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1.50	Payee name ACTBlue Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/14/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$0.38	Payee name ACTBlue Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/22 Rpt: 44/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/15/2020	5 Payee name ACTBlue	
6 Amount (\$) \$0.56	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/16/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$0.15	Payee name ACTBlue Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/17/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$7.12	Payee name ACTBlue Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/22 Rpt: 45/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/18/2020	5 Payee name ACTBlue	
6 Amount (\$) \$3.61	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/19/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$2.25	Payee name ACTBlue Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/20/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$0.75	Payee name ACTBlue Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/22 Rpt: 46/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/22/2020	5 Payee name ACTBlue	
6 Amount (\$) \$9.00	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/25/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$5.71	Payee name ACTBlue Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/28/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$0.15	Payee name ACTBlue Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/22 Rpt: 47/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/30/2020	5 Payee name ACTBlue	
6 Amount (\$) \$4.65	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/31/2020	Candidate/Officeholder name Office sought Office held	
Payee name ACTBlue		
Amount (\$) \$0.11	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2020	Candidate/Officeholder name Office sought Office held	
Payee name ACTBlue		
Amount (\$) \$1.50	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/22 Rpt: 48/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/06/2020	5 Payee name ACTBlue	
6 Amount (\$) \$1.88	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/07/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$4.50	Payee name ACTBlue Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/08/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$2.63	Payee name ACTBlue Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/22 Rpt: 49/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/09/2020	5 Payee name ACTBlue	
6 Amount (\$) \$0.76	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/10/2020	Payee name ACTBlue	
Amount (\$) \$0.38	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/11/2020	Payee name ACTBlue	
Amount (\$) \$16.43	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/22 Rpt: 50/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/12/2020	5 Payee name ACTBlue	
6 Amount (\$) \$1.50	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/14/2020	Payee name ACTBlue	
Amount (\$) \$1.13	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2020	Payee name ACTBlue	
Amount (\$) \$4.05	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/22 Rpt: 51/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/16/2020	5 Payee name ACTBlue	
6 Amount (\$) \$0.15	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2020	Payee name ACTBlue	
Amount (\$) \$4.58	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/18/2020	Payee name ACTBlue	
Amount (\$) \$13.88	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/22 Rpt: 52/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/19/2020	5 Payee name ACTBlue	
6 Amount (\$) \$5.63	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/20/2020	Candidate/Officeholder name Office sought Office held	
Payee name ACTBlue		
Amount (\$) \$0.76	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/21/2020	Candidate/Officeholder name Office sought Office held	
Payee name ACTBlue		
Amount (\$) \$2.25	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/22 Rpt: 53/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/22/2020	5 Payee name ACTBlue	
6 Amount (\$) \$7.13	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2020	Payee name ACTBlue	
Amount (\$) \$2.26	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/24/2020	Payee name ACTBlue	
Amount (\$) \$31.79	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/22 Rpt: 54/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/05/2020	5 Payee name ACTBlue	
6 Amount (\$) \$35.38	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/03/2020	Payee name ACTBlue	
Amount (\$) \$70.19	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2020	Payee name Austin Young Democrats	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 1311B E 6th Street Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/22 Rpt: 55/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/03/2020	5 Payee name Facebook	
6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
8 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 Digital Ads
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/18/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$35.00	Payee name Facebook Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
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 Digital Ads
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/21/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$50.00	Payee name Facebook Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
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 Digital Ads
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/22 Rpt: 56/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/19/2020	5 Payee name Facebook	
6 Amount (\$) \$35.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
8 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 Digital Ads
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/14/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$11.07	Payee name Facebook Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
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 Digital Ads
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/03/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$25.00	Payee name Facebook Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
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 Digital Ads
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/22 Rpt: 57/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 09/22/2020	5 Payee name Facebook	
6 Amount (\$) \$75.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
8 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 Digital Ads
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/04/2020	Candidate/Officeholder name Office sought Office held	
Payee name Facebook		
Amount (\$) \$25.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
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 Digital Ads
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/29/2020	Candidate/Officeholder name Office sought Office held	
Payee name Texas Democratic Party		
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 15707 Austin, TX 78761	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter File
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/22 Rpt: 58/58	2 FILER NAME Witt, Morgan	3 Filer ID (Ethics Commission Filers) 00090470
4 Date 08/01/2020	5 Payee name Texas Democratic Party	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code PO Box 15707 Austin, TX 78761	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter File
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2020	Payee name Vantiv eCommerce	
Amount (\$) \$129.60	Payee address; City; State; Zip Code 8500 Governor's Hill Drive Symmes Township Cincinnati, OH 45249	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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 Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held