FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 72 00090507 3 COMMITTEE NAME **OFFICE USE ONLY** Your Minute is Up Date Received **ELECTRONICALLY FILED** 01/15/2021 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 26703 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78755 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Becky M NAME NICKNAME LAST **SUFFIX** McMillian STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 6906 Dogwood Hollow STREET **ADDRESS** (Residence or Business) Austin, TX 78750 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** MAILING **ADDRESS** TX Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 779-8697 PHONE REPORT X January 15 30th day before election Exceeded \$500 Limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Month Year Month Day Year Day COVERED 07/01/2020 **THROUGH** 12/31/2020 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Other Primary Runoff General Special **GO TO PAGE 2**

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Comr	mission Filers)
Your Minute is Up			00090507		
14 COMMITTEE		CANDIDATE / OFFICEHOLDER NAME			
PURPOSE		Mr. Stephen Adler			
(Attach lists on plain	X Candidate				
paper to complete this report if necessary.)		OFFICE SOLICHT (condidate) / OFFICE HEL	D (officeholder)		
	Officeholder	OFFICE SOUGHT (candidate) / OFFICE HEL Mayor	.D (officeriolaer)		
		l wayor			
SUPPORT					
(Candidate or Measure)		BALLOT IDENTIFICATION / #	ELECTI	ON DATE	
X OPPOSE			Month	Day	Year
(Candidate or Measure)					
□ ACCICT	Measure				
ASSIST (Officeholder)		DESCRIPTION			
(Officeriolaer)					
15 CONTRIBUTION	1. TOTAL POLITICAL CON	<u> </u> TRIBUTIONS OF \$50 OR LESS (OTHER THA	N PLEDGES.	T .	
TOTALS		ES OF LOANS), UNLESS ITEMIZED	,	\$	\$0.00
	2. TOTAL POLITICAL C	ONTRIBUTIONS			
	(OTHER THAN PLEDGE	S, LOANS, OR GUARANTEES OF LOANS)		\$	\$30,325.79
EXPENDITURE	3 TOTAL BOLITICAL EXPE	ENDITURES OF \$100 OR LESS, UNLESS ITE	MIZED		
TOTALS	3. TOTAL TOLITICAL EXIT	INDITORIES OF \$100 OR EESS, ONLESS HE	IVIIZED	\$	\$0.00
	4. TOTAL POLITICAL EX	XPENDITURES			
				\$	\$20,613.79
CONTRIBUTION	E TOTAL DOLLTICAL CON	TRIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE		
BALANCE	REPORTING PERIOD	TRIBUTIONS MAINTAINED AS OF THE LAST	DATOFINE	\$	\$0.00
					,,,,,
OUTSTANDING	1	UNT OF ALL OUTSTANDING LOANS AS OF	THE LAST		
LOAN TOTALS	DAY OF THE REPORTIN	IG PERIOD		\$	\$0.00
16 AFFIDAVIT					
		I swear, or affirm, under penalty of per and correct and includes all informatio			
		Title 15, Election Code.			
		Poolar N	1 MaMillian		
			1 McMillian mpaign Treasur	er	
AFFIX NOTARY	STAMP / SEAL ABOVE	o.g.ratare or oa	paigcaca	.	
Sworn to and subscribed	hefore me, by the said	,1	his the		day
		n, witness my hand and seal of office.			uuy
	·,				
Signature of officer ad	ministering oath Prin	ted name of officer administering oath	Title of office	er administeri	ng oath
e.gstare or omoer du		and the second s	01 011100		

FORM SPAC SPECIFIC-PURPOSE COMMITTEE REPORT: **ADDENDUM PURPOSE** Page 3 of 72 12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) Your Minute is Up 00090507 14 COMMITTEE CANDIDATE / OFFICE HOLDER NAME **PURPOSE** Mr. Sabino Renteria (Attach lists on plain CANDIDATE paper to complete this report if necessary.) OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) OFFICE HOLDER Council Member, District 3 **SUPPORT** (Candidate or Measure) **BALLOT IDENTIFICATION ELECTION DATE** MONTH DAY YEAR X OPPOSE **MEASURE** (Candidate or Measure) DESCRIPTION ASSIST (Officeholders only) COMMITTEE CANDIDATE / OFFICE HOLDER NAME **PURPOSE** Ms. Paige Ellis (Attach lists on plain X CANDIDATE paper to complete this report if necessary.) OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) OFFICE HOLDER Council Member, District 8 **SUPPORT** (Candidate or Measure) **BALLOT IDENTIFICATION ELECTION DATE** MONTH DAY YEAR OPPOSE X **MEASURE** (Candidate or Measure) **DESCRIPTION ASSIST** (Officeholders only) COMMITTEE CANDIDATE / OFFICE HOLDER NAME **PURPOSE** Ms. Ann Kitchen (Attach lists on plain CANDIDATE paper to complete this report if necessary.) OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) OFFICE HOLDER Council Member, District 5 **SUPPORT** (Candidate or Measure) **BALLOT IDENTIFICATION ELECTION DATE** MONTH DAY YEAR X OPPOSE **MEASURE** (Candidate or Measure) DESCRIPTION **ASSIST** (Officeholders only)

SUBTOTALS - SPAC

FORM SPAC COVER SHEET PG 3

					4 of 72
l		EE NAME te is Up	18 Filer ID 00090507	(Ethics Co	ommission Filers)
		E SUBTOTALS SCHEDULE		SUB	TOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	30,242.76
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	83.03
3.		\$			
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION)R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
7.		SCHEDULE E: LOANS		\$	
8.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	20,613.79
9.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
10.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
11.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
12.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
13.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
14.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
ı					

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/34 Rpt: 5/72	
2	FILER NAME Your Minute	is Up			3	Filer ID (Ethics Commission 00090507	n Filers)
4	Date 09/19/2020	5 Full name of contributor Albertson, Susan6 Contributor address; City; St. 2311 W Parmer Lane	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$26.63
8	Principal occu Realtor	Austin, TX 78727 pation / Job title (See Instructions) [9	Employer (See Instructions Citywide Realty	5)		
	Date 09/21/2020	Full name of contributor Albertson, Susan Contributor address; City; St 2311 W Parmer Lane Austin, TX 78727	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$105.58
	Principal occu Realtor	pation / Job title (See Instructions		Employer (See Instructions Citywide Realty	S)		
	Date 10/27/2020	Full name of contributor Albertson, Susan Contributor address; City; St. 2311 W Parmer Lane	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$237.16
	Principal occu Broker	Austin, TX 78727 pation / Job title (See Instructions		Employer (See Instructions Citywide Realty	<u> </u> S)		
	Date 10/08/2020	Full name of contributor Allen, Luke Contributor address; City; St. 7201 RM 2222 Apartment 3208 Austin, TX 78730	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$26.63
	Principal occu Analyst	pation / Job title (See Instructions		Employer (See Instructions Lennar Homes	5)		
	Date 10/30/2020	Full name of contributor Arzu, Francisco Contributor address; City; St. 8605 Cobblestone Austin, TX 78735	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$26.63
	Principal occu Sr Director	pation / Job title (See Instructions		Employer (See Instructions Dematic	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/34 Rpt: 6/72	
2	FILER NAME Your Minute	is Un		3	Filer ID (Ethics Commission 00090507	n Filers)
4	Date 09/29/2020	 Full name of contributor out-of-state PAC (ID#:_ Baccus, Ralph Contributor address; City; State; Zip Code 11005 Centennial Trail 		7	Amount of Contribution (\$)	\$263.47
		Austin, TX 78726				
8	Principal occu President	pation / Job title (See Instructions)	9 Employer (See Instructions Baccus Holdings	5)		
	Date 10/15/2020	Full name of contributor out-of-state PAC (ID#:_ Bagus, Paul Contributor address; City; State; Zip Code 6008 Maurys Tr Austin, TX 78730)		Amount of Contribution (\$)	\$52.95
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date 12/04/2020	Full name of contributor out-of-state PAC (ID#:_ Barr, Alan Contributor address; City; State; Zip Code 7706 Stoneywood Dr			Amount of Contribution (\$)	\$52.95
	Principal occu N/A	Austin, TX 78731 pation / Job title (See Instructions)	Employer (See Instructions Retired	<u>;</u>)		
	Date 10/11/2020	Full name of contributor out-of-state PAC (ID#: Baumann, David Contributor address; City; State; Zip Code 16524 Kidd Ln			Amount of Contribution (\$)	\$16.11
		Austin, TX 78734				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	()		
	Date 09/22/2020	Full name of contributor out-of-state PAC (ID#:_ Bergen, Maria Contributor address; City; State; Zip Code 6602 Debcoe Dr Austin, TX 78749)		Amount of Contribution (\$)	\$26.63
	Principal occu N/A	pation / Job title (See Instructions)	Employer (See Instructions N/A	()		

	MONEI	ARY POLITICAL CONTRI	BUTION	15		SCHEDUL	E A1
	The Instruc	ction Guide explains how to comple	ete this for	m.	1	Total pages Schedule A1: Sch: 3/34 Rpt: 7/72	
2	FILER NAME	io Un			3	Filer ID (Ethics Commission	n Filers)
	Your Minute				L	00090507	
4	Date 12/07/2020	5 Full name of contributor out-of-state Berry, Frank	e PAC (ID#:)	7	Amount of Contribution (\$)	\$200.00
		6 Contributor address; City; State; Zip Code 11401 Sweet Basil Ct					
		Austin, TX 78726					
8	Principal occu Retired	oation / Job title (See Instructions)	9	Employer (See Instructions Retired	5)		
	Date	Full name of contributor out-of-state	e PAC (ID#:)		Amount of Contribution (\$)	
	09/19/2020	Best, Shannon					\$10.84
		Contributor address; City; State; Zip Code			İ		
		4101 licorice lane					
		Austin, TX 78728					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	SAHM			SAHM			
	Date	Full name of contributor ut-of-state	e PAC (ID#:)		Amount of Contribution (\$)	
	10/27/2020	Bigley, Carol					\$26.63
		Contributor address; City; State; Zip Code					
		10713 Sans Souci Place					
		Austin, TX 78759					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Sales			Excel Benefits			
	Date	Full name of contributor out-of-state	e PAC (ID#:)	Г	Amount of Contribution (\$)	
	09/23/2020	Blackstock, Randy					\$26.63
		Contributor address; City; State; Zip Code					
		9611 Holly Springs Drive					
		Austin, TX 78748					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor out-of-state	e PAC (ID#:)		Amount of Contribution (\$)	
	10/22/2020	Booe, Christina					\$105.58
		Contributor address; City; State; Zip Code			1		
		1124 Brookswood Ave					
		Austin, TX 78721					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Banquet Dire	ctor		W Hotel			
_			<u> </u>				

	MONEI	ARY POLITICAL CONTRIBUTI	Or	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	for	rm.	1	Total pages Schedule A1: Sch: 4/34 Rpt: 8/72	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Your Minute	•				00090507	
4	Date 11/04/2020	5 Full name of contributor out-of-state PAC (ID# Breed, Cynthia	#: <u></u>)	7	Amount of Contribution (\$)	\$50.00
		6 Contributor address; City; State; Zip Code 6601 Robbie Creek Cv					
		Austin, TX 78750	_				
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions Retired	5)		
	Date	Full name of contributor ut-of-state PAC (ID#	#:			Amount of Contribution (\$)	
	10/22/2020	Breeden, Darrell					\$237.16
		Contributor address; City; State; Zip Code					
		4010 Great Plains Dr.					
		Austin, TX 78735					
	Principal occu	pation / Job title (See Instructions)	\top	Employer (See Instructions	;) 		
	President	salar, vos las (est medesas.e)		Breeden Benefit Group	,		
	Date	Full name of contributor	#:)		Amount of Contribution (\$)	
	09/23/2020	Brown, Hadra				`,	\$54.00
		Contributor address; City; State; Zip Code					
		8812 Mesa drive					
		Austin TV 707F0					
	Principal occu	Austin, TX 78759 pation / Job title (See Instructions)	$\overline{}$	Employer (See Instructions	·/		
	Chief	Janotti Job the (See Histractions)		Home	•)		
	Date	Full name of contributor ut-of-state PAC (ID#	4.	```	_	Amount of Contribution (\$)	
	10/27/2020	Brunson, Leigh Ann	+			Amount of Continuation (\$)	\$26.63
	10/21/2020	Contributor address; City; State; Zip Code			l		Ψ20.00
		1409 Braided Rope					
		·					
		Austin, TX 78727	_		<u></u>		
	Principal occu N/A	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date	Full name of contributor	<u>.</u>)	_	Amount of Contribution (\$)	
	11/01/2020	Full name of contributor out-of-state PAC (ID# Buch, Kathleen	Ŧ:)		Amount of Contribution (\$)	\$26.63
	11/01/2020	Contributor address; City; State; Zip Code			l		Ψ20.00
		3410 Foothill Parkway					
		,					
		Austin, TX 78732					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	N/A			N/A			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE /	41
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/34 Rpt: 9/72	
2	FILER NAME Your Minute	is Up		3	Filer ID (Ethics Commission File 00090507	ers)
4	Date 10/27/2020	 Full name of contributor out-of-state PAC (ID#:_Buckner, Marg Contributor address; City; State; Zip Code 6209 Ledge Mountain Drive)	7	Amount of Contribution (\$) \$2	237.16
_		Austin, TX 78731				
8	•	pation / Job title (See Instructions) rector international	9 Employer (See Instructions Retired	5)		
	Date 10/20/2020	Full name of contributor out-of-state PAC (ID#:_Canfield, Philip Contributor address; City; State; Zip Code 2218 N. Fremont Street Chicago, IL 78701			Amount of Contribution (\$) \$1,0	052.95
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions Ariet Capital	<u> </u>		
	Date 09/22/2020	Full name of contributor out-of-state PAC (ID#:_Cantu, Gilbert Contributor address; City; State; Zip Code 3701 Hidden Estates Dr. Austin, TX 78727			Amount of Contribution (\$) \$.	105.58
	Principal occu Project mana	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/15/2020	Full name of contributor			Amount of Contribution (\$) \$:	131.89
	Principal occu Channel Mai	pation / Job title (See Instructions)	Employer (See Instructions Mosaic NetworX	5)		
	Date 09/24/2020	Full name of contributor out-of-state PAC (ID#:_ Carlett, Mary Jane Contributor address; City; State; Zip Code 6510 Poncha Pass Austin, TX 78749			Amount of Contribution (\$) \$2	100.00
	Principal occu Landlord	pation / Job title (See Instructions)	Employer (See Instructions own office building near		n White and Manchaca Rd	
		'				

	MONEI	ARY POLITICAL CONTRIBUT	IOI	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	s foi	rm.	1	Total pages Schedule A1: Sch: 6/34 Rpt: 10/72	
2	FILER NAME Your Minute	is Un			3	Filer ID (Ethics Commission 00090507	n Filers)
					L		
4	Date 10/14/2020	5 Full name of contributor out-of-state PAC (IE Chacon, Carlos	D#:)	7	Amount of Contribution (\$)	\$237.16
		6 Contributor address; City; State; Zip Code 209 Camperdown Elm Dr					
		Austin, TX 78748					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	CEO			Chacon Enterprises LLC	2		
	Date	Full name of contributor out-of-state PAC (IE)#:)		Amount of Contribution (\$)	
	10/30/2020	Christensen, Brandon					\$26.63
		Contributor address; City; State; Zip Code			1		
		2301 S Mopac Expwy					
		Apt 115					
		Austin, TX 78746					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	N/A			N/A			
	Date	Full name of contributor ut-of-state PAC (IE	D#:)		Amount of Contribution (\$)	
	11/27/2020	Clark, George					\$105.58
		Contributor address; City; State; Zip Code			1		
		10900 Research Blvd					
		Suite 160-C #63					
		Austin, TX 78759					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Partner			Venturi Private Wealth			
	Date	Full name of contributor ut-of-state PAC (IE	D#:			Amount of Contribution (\$)	
	09/22/2020	Coleman, Kristen					\$26.63
		Contributor address; City; State; Zip Code			1		
		12700 Bismark Dr					
		Austin, TX 78748					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Director of M	arketing and New Business		Illuminas			
	Date	Full name of contributor out-of-state PAC (IE)#: _)	Π	Amount of Contribution (\$)	
	10/19/2020	Collins, Chris					\$105.58
		Contributor address; City; State; Zip Code			1		
		5020 China Garden Dr					
		Austin, TX 78730					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	SVP Global	Operations		SigmaSense, LLC			
			•				

	MONEI	ARY POLITICAL (CONTRIBUTIO)NS			SCHEDUL	E A1
	The Instruc	ction Guide explains hov	v to complete this fo	orm.		1	Total pages Schedule A1: Sch: 7/34 Rpt: 11/72	
2	FILER NAME Your Minute	ic I In				3	Filer ID (Ethics Commission 00090507	n Filers)
		•				L		
4	Date 09/24/2020	Full name of contributor Conn, Trevor	out-of-state PAC (ID#:_			7	Amount of Contribution (\$)	\$52.95
		6 Contributor address; City; S 1001 Partida Trail	tate; Zip Code					
		Leander, TX 78641						
8	Principal occu	pation / Job title (See Instruction:	5)	9 Employ	er (See Instructions	s)		
	Director of S	oftware Engineering		Dell Te	echnologies			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)	
	09/21/2020	Cook, Laura			,		(1)	\$54.00
	00,11,1010	Contributor address; City; S	tata: 7in Cada			ŀ		4000
		9425 Shady Oaks Drive	tate, Zip Code					
		9425 Shauy Caks Drive						
		Austin, TX 78729						
	Principal occu	I	5)	Emplov	er (See Instructions	<u>L</u> S)		
	homemaker	,	,	N/A	(,		
	Date	Full name of contributor	Out of state DAC (ID#))	Г	Amount of Contribution (\$)	
	11/04/2020	Cooper, Jennifer	out-of-state PAC (ID#:_				Amount of Continuation (4)	\$25.00
	11/04/2020		toto. Zia Cada			-		Ψ25.00
		Contributor address; City; S	tate; Zip Code					
		na 						
		Austin, TX 78701						
	Principal occu	pation / Job title (See Instructions	5)	Employ	er (See Instructions	<u>. </u>		
	N/A			N/A				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	12/03/2020	Cummings, Michelle	out or state 1710 (IBM		/		7 mileant of Continuation (4)	\$26.63
		Contributor address; City; S	tata: 7in Cada			ŀ		+=0.00
		10009 Loxley Lane	tate, Zip Code					
		10003 Loxicy Lane						
		Austin, TX 78717						
	Principal occu	pation / Job title (See Instructions	5)	Employ	er (See Instructions	s)		
	Txdot			Retired	d			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/24/2020	Cupp, Charles						\$105.58
		Contributor address; City; S	tate; Zip Code			1		
		10216 Missel Thrush Dr						
		Austin, TX 78750						
	Principal occu	pation / Job title (See Instruction:	s)	Employ	er (See Instructions	5)		
	Motor Coach	n Driver		Star SI	huttle and Charte	rs		

	MONEI	ARY POLITICAL CO	NIRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this fo	rm.	1	Total pages Schedule A1: Sch: 8/34 Rpt: 12/72	
2	FILER NAME Your Minute	is Up			3	Filer ID (Ethics Commission 00090507	n Filers)
4	Date 09/23/2020	·	out-of-state PAC (ID#: Zip Code)	7	Amount of Contribution (\$)	\$26.63
8	Principal occu Mastering en	Pacheco, CA 94553 pation / Job title (See Instructions) gineer	[5	Employer (See Instructions Self employed	<u> </u> s)		
	Date 10/23/2020	De Marines, Regan Contributor address; City; State; 7305 Bering Cove Austin, TX 78759	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$526.63
		pation / Job title (See Instructions) Vellness Advocate		Employer (See Instructions self	s)		
	Date 10/27/2020	Full name of contributor Dolan, Mark Contributor address; City; State; 54 Rainey St Unit 1206 Austin, TX 78701	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$52.95
		pation / Job title (See Instructions) nodman Sales & Distribution		Employer (See Instructions Retired	<u>1</u> S)		
	Date 10/27/2020	Full name of contributor Doss, Travis Contributor address; City; State; PO Box 1105 Del Valle, TX 78617	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$131.89
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	5)		
	Date 10/30/2020	Full name of contributor Doss, Travis Contributor address; City; State; PO Box 1105 Del Valle, TX 78617	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$131.89
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	s)		
			<u>.</u>				

	MONEI	ARY POLITICAL CONTRIBUT	IOI	NS		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete this	s for	m.	1	Total pages Schedule A1: Sch: 9/34 Rpt: 13/72	
2	FILER NAME Your Minute	is Up			3	Filer ID (Ethics Commission 00090507	ı Filers)
4	Date 10/14/2020	 Full name of contributor	D#:		7	Amount of Contribution (\$)	\$52.95
8	Principal occu Principal	Johnson city, TX 78636 pation / Job title (See Instructions)	9	Employer (See Instructions Ert lighting	<u> </u> s)		
	Date 09/22/2020	Full name of contributor out-of-state PAC (IDD) Drinnan, Michelle Contributor address; City; State; Zip Code 13314 Council Bluff Austin, TX 78727	D#:		•	Amount of Contribution (\$)	\$52.95
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions Apartments NOW	s)		
	Date 09/21/2020	Full name of contributor out-of-state PAC (ID Ellis, Dustin Contributor address; City; State; Zip Code 8721 Fenton Dr Austin, TX 78736	O#:			Amount of Contribution (\$)	\$26.63
	Principal occu Vice Preside	pation / Job title (See Instructions)		Employer (See Instructions Accu-Print	<u> </u> 5)		
	Date 09/21/2020	Full name of contributor out-of-state PAC (IE Ellsworth, Brannon Contributor address; City; State; Zip Code 1110 Morrow St #A Austin, TX 78757	 D#:)		Amount of Contribution (\$)	\$52.95
	Principal occu Lieutenant	pation / Job title (See Instructions)		Employer (See Instructions Austin Police Departme			
	Date 10/13/2020	Full name of contributor out-of-state PAC (IE Emerson, Brad Contributor address; City; State; Zip Code 423 Ridgewood Road West Lake Hills, TX 78746	D#:			Amount of Contribution (\$)	\$26.63
	Principal occu Svp	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		

The Instruction Guide explains how to complete this form. 2 FILER NAME Your Minute is Up 4 Date 9 Full name of contributor max of state PAC (IDst.		MONEI	ARY POLITICAL CONTRIB	UHON	IS		SCHEDUL	E A1
Your Minute is Up 00090507		The Instruc	ction Guide explains how to complete	e this for	m.	1		
4 Dete	2					3		n Filers)
See Falk. Thomas \$26.63 6 Contributor address; City; State; Zip Code 1803 Kingwood Cv Austin, TX 78755 8 Principal occupation / Job title (See Instructions) Oracle Pate Folines, Yasbel Folines, Yasbel Falk City; State; Zip Code 9308 Sawyer Fay Ln Austin, TX 78748-3107 Principal occupation / Job title (See Instructions) Employer (See Instructions) Owner Full name of contributor out-of-state PAC (IDF: Amount of Contribution (\$) \$237.16 Principal occupation / Job title (See Instructions) Habana Restaurant Daile Full name of contributor out-of-state PAC (IDF: Amount of Contribution (\$) \$10.84 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Fluty, Katherine Contributor address; City; State; Zip Code 1775 Kammerer Ave San Jose, CA 95116 Principal occupation / Job title (See Instructions) Ek Foods Date Full name of contributor out-of-state PAC (IDF: Austin (\$) S52.95 Contributor address; City; State; Zip Code 3101 Shoreline Drive #711 Austin, TX 78728 Principal occupation / Job title (See Instructions) Dual Chief Engineer Whitelodging Inc. Date Full name of contributor out-of-state PAC (IDF: Austin (\$) Amount of Contribution (\$) S52.95 Contributor address; City; State; Zip Code 7502 Creekbluff Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$105.58 Contributor address; City; State; Zip Code 7502 Creekbluff Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions)			·			L		
1803 Kingwood Cv Austin, TX 78757	4		—	PAC (ID#:)	7	Amount of Contribution (\$)	\$26.63
Principal occupation / Job title (See Instructions) Sales Caracteristic Caracteristic			1803 Kingwood Cv					
Sales Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$)								
Flores, Yasbel \$237.16 Contributor address; City; State; Zip Code 9308 Sawyer Fay Ln Austin, TX 78748-3107 Principal occupation / Job title (See Instructions) Owner Full name of contributor out-of-state PAC (ID#:	8		pation / Job title (See Instructions)	9		5)		
Contributor address; City; State; Zip Code 9308 Sawyer Fay Ln Austin, TX 78748-3107 Principal occupation / Job title (See Instructions) Owner Date		Date	Full name of contributor out-of-state P	PAC (ID#:)		Amount of Contribution (\$)	
9308 Sawyer Fay Ln Austin, TX 78748-3107 Principal occupation / Job title (See Instructions) Owner Date		10/30/2020	Flores, Yasbel					\$237.16
Principal occupation / Job title (See Instructions) Owner Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$)			Contributor address; City; State; Zip Code	•••••		İ		
Principal occupation / Job title (See Instructions) Owner Employer (See Instructions) Habana Restaurant			9308 Sawyer Fay Ln					
Owner Habana Restaurant Date 12/27/2020 Full name of contributor			Austin, TX 78748-3107					
Date Full name of contributor out-of-state PAC (ID#:		Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
12/27/2020 Fluty, Katherine \$10.84		Owner			Habana Restaurant			
Contributor address; City; State; Zip Code 1775 Kammerer Ave San Jose, CA 95116 Principal occupation / Job title (See Instructions) Food Worker Date 10/12/2020 Fontaine, Joseph Contributor address; City; State; Zip Code 3101 Shoreline Drive #711 Austin, TX 78728 Principal occupation / Job title (See Instructions) Dual Chief Engineer Date 10/10/2020 Firerson-Stroud, Leonor Contributor address; City; State; Zip Code 7502 Creekbluff Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions) Whitelodging Inc. Amount of Contribution (\$) \$105.58		Date	Full name of contributor ut-of-state P	PAC (ID#:)		Amount of Contribution (\$)	
1775 Kammerer Ave San Jose, CA 95116		12/27/2020	Fluty, Katherine					\$10.84
San Jose, CA 95116 Principal occupation / Job title (See Instructions) Food Worker Date 10/12/2020 Fontaine, Joseph Contributor address; City; State; Zip Code 3101 Shoreline Drive #711 Austin, TX 78728 Principal occupation / Job title (See Instructions) Dual Chief Engineer Date 10/10/2020 Firerson-Stroud, Leonor Contributor address; City; State; Zip Code 10/10/2020 Frieson-Stroud, Leonor Contributor address; City; State; Zip Code 10/10/2020 Frieson-Stroud, Leonor Employer (See Instructions) Whitelodging Inc. Amount of Contribution (\$) \$105.58 \$105.58 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Sandard Research Amount of Contribution (\$) Frierson-Stroud, Leonor Engloyer (See Instructions) Frierson-Stroud, Leonor Employer (See Instructions)			Contributor address; City; State; Zip Code	••••••				
Principal occupation / Job title (See Instructions) Food Worker Date 10/12/2020 Full name of contributor out-of-state PAC (ID#:			1775 Kammerer Ave					
Principal occupation / Job title (See Instructions) Food Worker Date 10/12/2020 Full name of contributor out-of-state PAC (ID#:			San Jose, CA 95116					
Date Full name of contributor out-of-state PAC (ID#:		Principal occu			Employer (See Instructions	<u>L</u>		
10/12/2020 Fontaine, Joseph \$52.95 Contributor address; City; State; Zip Code 3101 Shoreline Drive #711 Austin, TX 78728 Principal occupation / Job title (See Instructions) Dual Chief Engineer Date 10/10/2020 Frierson-Stroud, Leonor Contributor address; City; State; Zip Code 7502 Creekbluff Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$105.58		Food Worker			EK Foods			
10/12/2020 Fontaine, Joseph \$52.95 Contributor address; City; State; Zip Code 3101 Shoreline Drive #711 Austin, TX 78728 Principal occupation / Job title (See Instructions) Dual Chief Engineer Date 10/10/2020 Frierson-Stroud, Leonor Contributor address; City; State; Zip Code 7502 Creekbluff Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$105.58		Date	Full name of contributor out-of-state P	PAC (ID#:)		Amount of Contribution (\$)	
Austin, TX 78728 Principal occupation / Job title (See Instructions) Dual Chief Engineer Date 10/10/2020 Frierson-Stroud, Leonor Contributor address; City; State; Zip Code 7502 Creekbluff Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions) Whitelodging Inc. Amount of Contribution (\$) \$105.58		10/12/2020	—					\$52.95
Austin, TX 78728 Principal occupation / Job title (See Instructions) Dual Chief Engineer Date 10/10/2020 Frierson-Stroud, Leonor Contributor address; City; State; Zip Code 7502 Creekbluff Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions) Whitelodging Inc. Amount of Contribution (\$) \$105.58 \$105.58			Contributor address; City; State; Zip Code			l		
Principal occupation / Job title (See Instructions) Dual Chief Engineer Whitelodging Inc. Page			3101 Shoreline Drive #711					
Dual Chief Engineer Whitelodging Inc. Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/10/2020 Frierson-Stroud, Leonor Contributor address; City; State; Zip Code 7502 Creekbluff Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions)			Austin, TX 78728					
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/10/2020 Frierson-Stroud, Leonor \$105.58 Contributor address; City; State; Zip Code 7502 Creekbluff Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
10/10/2020 Frierson-Stroud, Leonor \$105.58 Contributor address; City; State; Zip Code 7502 Creekbluff Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Dual Chief E	ngineer		Whitelodging Inc.			
Contributor address; City; State; Zip Code 7502 Creekbluff Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Date	Full name of contributor uut-of-state P	PAC (ID#:			Amount of Contribution (\$)	
7502 Creekbluff Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions)		10/10/2020	Frierson-Stroud, Leonor					\$105.58
Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions)			Contributor address; City; State; Zip Code					
Principal occupation / Job title (See Instructions) Employer (See Instructions)			7502 Creekbluff					
Principal occupation / Job title (See Instructions) Employer (See Instructions)			Austin, TX 78750					
Doctor Physician		Principal occu			Employer (See Instructions	5)		
1		Doctor			Physician			
	_			ı				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 11/34 Rpt: 15/72	
2	FILER NAME Your Minute	is Up		3 Filer ID (Ethics Commission 00090507	n Filers)
4	Date 09/22/2020	5 Full name of contributor out-of-state PAC (ID#: Gerhardt, Shelley	:)	7 Amount of Contribution (\$)	\$105.58
		6 Contributor address; City; State; Zip Code 2521 Champions Corner Dr.			
_	Deinsinalassa	Leander, TX 78641	D. Frankrick (O. a. kratovski ara		
8	Owner -	pation / Job title (See Instructions)	9 Employer (See Instructions Southwest Independent	: Insurance Services, Inc	
	Date 09/25/2020	Full name of contributor out-of-state PAC (ID#: Gholami, David	:)	Amount of Contribution (\$)	\$26.63
	00/20/2020				Ψ20.00
		7201 Ranch Rd 2222			
		Aprt # 2222			
	Principal occu	Austin, TX 78730 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
	Software De	'	CTG	-)	
	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
	09/19/2020	Graeber, Courtney			\$158.21
		Contributor address; City; State; Zip Code			
		5325 Valburn Circle			
		Austin, TX 78731			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	SAHM and F	Realtor	SAHM and Realtor		
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	
	09/17/2020				\$105.58
		Contributor address; City; State; Zip Code			
		9701 Anchusa Trail			
		Austin, TX 78736			
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	RN		Seton Main		
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	# 105 50
	11/11/2020				\$105.58
		Contributor address; City; State; Zip Code 627 Allen St			
		32.7 mon 31			
		Austin, TX 78702	_		
		pation / Job title (See Instructions)	Employer (See Instructions		
	El Presidente	=	ATX Eastside Properties	S LLC	

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 12/34 Rpt: 16/72
2	FILER NAME Your Minute	is Up		3 Filer ID (Ethics Commission Filers) 00090507
4	Date 12/30/2020	 Full name of contributor out-of-state PAC (ID#:_Gray, Peter Contributor address; City; State; Zip Code 627 Allen St 		7 Amount of Contribution (\$) \$105.58
		Austin, TX 78702		
8	Principal occu El Presidento	pation / Job title (See Instructions) e	9 Employer (See Instructions ATX Eastside Properties	
	Date 09/25/2020	Full name of contributor out-of-state PAC (ID#:_ Green, David Contributor address; City; State; Zip Code 6420 Ruxton Ln Austin, TX 78749		Amount of Contribution (\$) \$105.58
	Principal occu N/A	pation / Job title (See Instructions)	Employer (See Instructions Retired	
	Date 10/30/2020	Full name of contributor out-of-state PAC (ID#:_ Griggs, Stephen R Contributor address; City; State; Zip Code 2905 Hillview Road Austin, TX 78703-1120		Amount of Contribution (\$) \$10.84
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
	Date 11/04/2020	Full name of contributor out-of-state PAC (ID#:_ Halfhill, Matthew Contributor address; City; State; Zip Code 901 5th St E Apt 1514 Austin, TX 78702		Amount of Contribution (\$) \$225.00
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions Nice Kicks)
	Date 09/18/2020	Full name of contributor out-of-state PAC (ID#:_ Hampsten, Phil Contributor address; City; State; Zip Code 9402 Sherbrooke Austin, TX 78729		Amount of Contribution (\$) \$105.58
	Principal occu President/Ov	pation / Job title (See Instructions) wner	Employer (See Instructions Hampsten Consulting, L	

	MONEI	ARY POLITICAL CONTRIBUT	IOI	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	s for	rm.	1	Total pages Schedule A1: Sch: 13/34 Rpt: 17/72	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Your Minute	<u>'</u>				00090507	
4	Date 09/22/2020	5 Full name of contributor out-of-state PAC (IE Harms, Heather	D#:)	7	Amount of Contribution (\$)	\$26.63
		6 Contributor address; City; State; Zip Code 1303 Pasaguarda Drive					
		Austin, TX 78746					
8	Principal occu Mom	pation / Job title (See Instructions)	9	Employer (See Instructions Stay at home mom.	s)		
	Date	Full name of contributor out-of-state PAC (IE)#:)		Amount of Contribution (\$)	
	12/06/2020	Hasty, William					\$52.95
		Contributor address; City; State; Zip Code			1		
		1095 Deerfield Road					
		Dripping Springs, TX 78620			<u> </u>		
		pacing		Employer (See Instructions	5)		
	Director Eng			Lab126	_		
	Date	Full name of contributor out-of-state PAC (IE	D#:)		Amount of Contribution (\$)	4405.50
	09/20/2020	Hayden, Joseph					\$105.58
		Contributor address; City; State; Zip Code					
		701 N. Vista Ridge Blvd. 11104					
		Cedar Park, TX 78613					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	President	,		Self Employed	,		
	Date	Full name of contributor)#·		Г	Amount of Contribution (\$)	
	09/22/2020	Healey, Patrick	J			ranount of Continuation (4)	\$79.26
	00,12,2020	Contributor address; City; State; Zip Code			ł		4.0.20
		5201 Buffalo Pass					
		Austin, TX 78745					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Other			City Of Austin			
	Date	Full name of contributor ut-of-state PAC (IE	D#:)		Amount of Contribution (\$)	
	10/28/2020	Hess, Deborah Delanna					\$26.63
		Contributor address; City; State; Zip Code]		
		7309 Augusta Circle					
		Plano, TX 75025					
	Principal occur	pation / Job title (See Instructions)		Employer (See Instructions	<u>L</u>		
	Agent			AMBA	,		
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	MONEI	ARY POLITICAL CON	ITRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to c	complete this for	rm.	1	Total pages Schedule A1: Sch: 14/34 Rpt: 18/72	
2	FILER NAME Your Minute	is Up			3	Filer ID (Ethics Commission 00090507	n Filers)
4	Date 10/28/2020	 Full name of contributor on Hess, Kenneth Contributor address; City; State; Z 7309 Augusta Circle 	ut-of-state PAC (ID#: ip Code		7	Amount of Contribution (\$)	\$26.63
8		Plano, TX 75025 pation / Job title (See Instructions) stems Engineer	9	Employer (See Instructions Raytheon	5)		
	Date 10/05/2020	Hetzel, Stephen Contributor address; City; State; Z 1301 S IH 35 Ste 200 Austin, TX 78741	ut-of-state PAC (ID#: ip Code			Amount of Contribution (\$)	\$105.58
	Principal occu Partner	pation / Job title (See Instructions)		Employer (See Instructions BidPrime	i)		
	Date 09/17/2020	Full name of contributor on the contributor of the contributor address; City; State; Zity; State	ut-of-state PAC (ID#: ip Code			Amount of Contribution (\$)	\$52.95
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u> </u>		
	Date 10/27/2020	Full name of contributor on Howard, Ruth Contributor address; City; State; Z 4900 Interlachen Lane Austin, TX 78747	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$52.95
	Principal occu Retired Teac	pation / Job title (See Instructions) her		Employer (See Instructions Retired)		
	Date 11/04/2020	Full name of contributor on Howell, Ken Contributor address; City; State; Zona Austin, TX 78701	ut-of-state PAC (ID#: ip Code)		Amount of Contribution (\$)	\$50.00
	Principal occu N/A	pation / Job title (See Instructions)		Employer (See Instructions N/A)		

	MONEI	ARY POLITICAL CONTI	RIBUTION	IS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to com	plete this forr	n.	1	Total pages Schedule A1: Sch: 15/34 Rpt: 19/72	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Your Minute	·				00090507	
4	Date 11/04/2020	5 Full name of contributor out-of-s Hoyt, Nicholas	state PAC (ID#:)	7	Amount of Contribution (\$)	\$200.00
		6 Contributor address; City; State; Zip Co 5450 Bee Caves Rd Ste 2A West Lake Hills, TX 78746	ode				
8	Principal occu Trader	pation / Job title (See Instructions)	9	Employer (See Instructions Imbue Capital)		
	Date 09/22/2020	Full name of contributor out-of-s	state PAC (ID#:)		Amount of Contribution (\$)	\$52.95
		Contributor address; City; State; Zip Co 7700 Vista Mejor Drive	ode				
	5	Austin, TX 78744					
	Flight Attend	pation / Job title (See Instructions) ant		Employer (See Instructions United Airlines)		
	Date 10/27/2020	Full name of contributor out-of-s Ingram, Diane Contributor address; City; State; Zip Co 2608 Chitina Court	state PAC (ID#:			Amount of Contribution (\$)	\$52.95
		Cedar Park, TX 78613					
	Principal occu Business Ow	pation / Job title (See Instructions) /ner		Employer (See Instructions Retired)		
	Date 10/30/2020	Full name of contributor out-of-s Jackson, Kacee Contributor address; City; State; Zip Co 8127 Mesa Drive #206-53 Austin, TX 78759	state PAC (ID#:			Amount of Contribution (\$)	\$237.16
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions The 360 Company)		
	Date 09/20/2020	Full name of contributor out-of-s Jackson, Kacee Contributor address; City; State; Zip Co 8500 Adirondack Cove Austin, TX 78759	state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions The 360 Company)		
			•				

	MONEI	ARY POLITICAL CON	TRIBUTION	IS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 16/34 Rpt: 20/72	
2	FILER NAME	:- II-			3	Filer ID (Ethics Commission	on Filers)
	Your Minute					00090507	
4	Date 10/14/2020	5 Full name of contributor out Jackson, Kacee	:-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$1,200.00
		6 Contributor address; City; State; Zip 8500 Adirondack Cove	o Code				
		Austin, TX 78759					
8	Principal occu Owner	pation / Job title (See Instructions)	9	Employer (See Instructions The 360 Company)		
	Date	Full name of contributor out	-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/28/2020	Janus, James					\$131.89
		Contributor address; City; State; Zip	Code				
		6716 Cornish Hen Ln					
		Austin, TX 78747					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions)		
	N/A			N/A			
	Date	Full name of contributor out	-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/28/2020	Johnson, Corry					\$26.63
		Contributor address; City; State; Zip	Code				
		10123 Dianella Lane					
		Austin, TX 78759-3038					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions)		
	Sales Manag	er		At home			
	Date	Full name of contributor ut	-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/30/2020	Johnson, Karen					\$52.95
		Contributor address; City; State; Zip	Code				
		2069 Old Willow Rd					
		Northfield, IL 60093					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions)		
	Managing Pa	artner		301 Holdings			
	Date	Full name of contributor out	t-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/21/2020	Johnson, William					\$52.95
		Contributor address; City; State; Zip	Code				
		10123 Dianella Lane					
		Austin, TX 78759					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Sales			Home			
_			I				

	MONEI	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 17/34 Rpt: 21/72	
2	FILER NAME Your Minute	ie I In			3	Filer ID (Ethics Commission 00090507	n Filers)
		-			L		
4	Date 09/23/2020	5 Full name of contributor Keenan, Douglas P6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$105.58
		2001 Port Royal Dr	ate, Zip Code				
		Austin, TX 78746					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Principal Tec	chnical Consultant		KEENsult International			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/18/2020	Kelley, Tiffany	_				\$52.95
		Contributor address; City; St	ate; Zip Code		1		
		11927 Brookwood Cir					
		Austin, TX 78750					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Client Succe	ss Executive		3M			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/21/2020	Kline, Jacob					\$52.95
		Contributor address; City; St	ate; Zip Code		1		
		2821 Stock Drive					
		Austin, TX 78741					
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	N/A			N/A			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/24/2020	Kulesza, Chester					\$105.58
		Contributor address; City; St	ate; Zip Code]		
		11613 Hollister Drive					
		Austin, TX 78739					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	CFO			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/23/2020	Kuznieski, Bruno					\$26.63
		Contributor address; City; St	ate; Zip Code		1		
		7604 Mifflin Kenedy Terra	ce				
		Austin, TX 78749					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	General Man			Family Sports			
_							

	MONEI	ARY POLITICAL CONTI	RIBUTION	15		SCHEDUL	E A1
	The Instruc	ction Guide explains how to com	plete this for	m.	1	Total pages Schedule A1: Sch: 18/34 Rpt: 22/72	
2	FILER NAME Your Minute	is Up			3	Filer ID (Ethics Commission 00090507	n Filers)
4	Date 09/20/2020	Lastor, Dennis 6 Contributor address; City; State; Zip Co 10100 Lake Ridge Dr	state PAC (ID#: ode		7	Amount of Contribution (\$)	\$105.58
8	Principal occur	Austin, TX 78733 pation / Job title (See Instructions)	9	Employer (See Instructions	<u>)</u>		
Ü	Engineering			Advanced Micro Devices			
	Date 10/10/2020	Full name of contributor out-of- Lavorgna, Theresa Contributor address; City; State; Zip Co 1201 Piedmont Ave Austin, TX 78757	state PAC (ID#:)		Amount of Contribution (\$)	\$26.63
	Principal occu Private	pation / Job title (See Instructions)		Employer (See Instructions Private	5)		
	Date 10/07/2020	Full name of contributor out-of- Leal, Roman Contributor address; City; State; Zip Co 9210 Hurley Cove Austin, TX 78759	state PAC (ID#:			Amount of Contribution (\$)	\$300.00
		pation / Job title (See Instructions)		Employer (See Instructions			
	Owner			Roman Leal Construction	n 8	& Design	
	Date 09/22/2020	Full name of contributor out-of- Lepore, Dan Contributor address; City; State; Zip Co 3707 Hidden Estates Dr Austin, TX 78727	state PAC (ID#: ode)		Amount of Contribution (\$)	\$105.58
	Principal occu Senior Engin	pation / Job title (See Instructions) eer		Employer (See Instructions	()		
	Date 10/30/2020	Full name of contributor out-of- Light, Dana Contributor address; City; State; Zip Co 1309 Anhalt Dr Pflugerville, TX 78660	state PAC (ID#:			Amount of Contribution (\$)	\$237.16
	Principal occu Personal Tra	pation / Job title (See Instructions) iner		Employer (See Instructions Self employed)		
			•				

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 19/34 Rpt: 23/72	
	FILER NAME				1	Filer ID (Ethics Commission	n Filers)
	Your Minute	is Up				00090507	
	Date 09/21/2020	Full name of contributor Maloney, Kimberly	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$105.58
		6 Contributor address; City; St 12100 Terraza Cir	ate; Zip Code				
		Austin, TX 78726					
8	Principal occup	pation / Job title (See Instructions	9	9 Employer (See Instructions			
	Sr. Engineer			Bullock, Bennett & Asso	ос		
	Date	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	
	10/07/2020	Manis, Cynthia					\$500.00
		Contributor address; City; St	ate; Zip Code		1		
		8600 RM- 620					
		Austin, TX 78726					
		pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired	`	,	Retired	,		
	Date	Full name of contributor	out-of-state PAC (ID#:)	T .	Amount of Contribution (\$)	
	11/04/2020	Martinez, Andrea					\$75.00
		Contributor address; City; St	ate; Zip Code		1		
		na					
		Auctin TV 70701					
	Dringinal occur	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	c) 		
	нистрат оссо; N/A	pation / Job title (See Instructions		N/A	3)		
			<u> </u>			A (O '' ' . (th)	
	Date	Full name of contributor	out-of-state PAC (ID#:)	'	Amount of Contribution (\$)	# FQ 05
	09/23/2020	Maus, Layla Contributor address; City; St	ate; Zip Code				\$52.95
		20721 Ed Acklin Rd					
		Manor, TX 78653					
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	self			self			
	Date	Full name of contributor	out-of-state PAC (ID#:)	'	Amount of Contribution (\$)	
	09/21/2020	McBee, Pamela					\$52.95
		Contributor address; City; St	ate; Zip Code				
		1405 Cedar Brook Drive					
		Cedar Park, TX 78614					
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Employee			City of Austin			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 20/34 Rpt: 24/72	
2	FILER NAME Your Minute	is Un		3	Filer ID (Ethics Commission 00090507	n Filers)
4	Date 09/22/2020	 Full name of contributor out-of-state PAC (ID#: McCracken, Karen Contributor address; City; State; Zip Code 4204 Riverside Dr)	7	Amount of Contribution (\$)	\$105.58
		Flower Mound, TX 75028				
8	Principal occu Co Owner	pation / Job title (See Instructions)	9 Employer (See Instructions Home business	s)		
	Date 09/15/2020	Full name of contributor out-of-state PAC (ID#: McMillian, Sherrell Contributor address; City; State; Zip Code 7603 Midpark Ct. Austin, TX 78750			Amount of Contribution (\$)	\$263.47
	Principal occu Office Admir	pation / Job title (See Instructions)	Employer (See Instructions Crossfield Technology	5)		
	Date 12/04/2020	Full name of contributor out-of-state PAC (ID#: McMillian, Sherrell Contributor address; City; State; Zip Code 7603 Midpark Ct. Austin, TX 78750			Amount of Contribution (\$)	\$47.68
	Principal occu Office Admir	pation / Job title (See Instructions) nistrator	Employer (See Instructions Crossfield Technology	<u> </u> 5)		
	Date 10/01/2020	Full name of contributor out-of-state PAC (ID#: Meadows, Joe Contributor address; City; State; Zip Code 8518 Croydon Loop			Amount of Contribution (\$)	\$26.63
	Principal occu	Austin, TX 78748 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	N/A		N/A			
	Date 09/24/2020	Full name of contributor out-of-state PAC (ID#: Melfi, Dan Contributor address; City; State; Zip Code 12916 Hunters Chase Dr Austin, TX 78729)		Amount of Contribution (\$)	\$52.95
	Principal occu estimator	pation / Job title (See Instructions)	Employer (See Instructions GC	5)		

	MONEI	ARY POLITICAL CONTRIB	BUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete	e this for	m.	1	Total pages Schedule A1: Sch: 21/34 Rpt: 25/72	
2	FILER NAME Your Minute	is Up			3	Filer ID (Ethics Commission 00090507	n Filers)
4	Date 11/04/2020	 Full name of contributor out-of-state F Merrihew, Collin Contributor address; City; State; Zip Code na 	PAC (ID#:		7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	9	Employer (See Instructions N/A	j 5)		
	Date 09/18/2020	Full name of contributor out-of-state F Messner, Chris Contributor address; City; State; Zip Code 14240 Altocedro Dr Delray Beach, FL 33484	PAC (ID#:)		Amount of Contribution (\$)	\$10.84
	Principal occu N/A	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 09/21/2020	Full name of contributor out-of-state F Miller, Linda Contributor address; City; State; Zip Code 5000 Mission Oaks Blvd Unit 20 Austin, TX 78735	PAC (ID#:			Amount of Contribution (\$)	\$105.58
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions	<u>(</u>		
	Date 10/07/2020	Full name of contributor out-of-state F Mitchell, Melissa Contributor address; City; State; Zip Code 16705 Ennis Trl Austin, TX 78717	PAC (ID#:)		Amount of Contribution (\$)	\$52.95
	Principal occu CPA	pation / Job title (See Instructions)		Employer (See Instructions Self employed	5)		
	Date 10/22/2020	Full name of contributor out-of-state F Mitchell, Melissa Contributor address; City; State; Zip Code 16705 Ennis Trl Austin, TX 78717	PAC (ID#:)		Amount of Contribution (\$)	\$105.58
	Principal occu CPA	pation / Job title (See Instructions)		Employer (See Instructions Self employed	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this fo	orm.	l	Fotal pages Schedule A1: Sch: 22/34 Rpt: 26/72	
2	FILER NAME Your Minute	is Up		l	Filer ID (Ethics Commission File)	ilers)
4	Date 09/22/2020	 Full name of contributor out-of-state PAC (ID#:_ Morrow, Jessica Contributor address; City; State; Zip Code 5732 Misty Hill Cove)	<u> </u>	Amount of Contribution (\$)	\$52.95
		Austin, TX 78759				
8	Principal occu CEO	pation / Job title (See Instructions)	9 Employer (See Instructions Self-Employed	s)		
	Date 09/29/2020	Full name of contributor out-of-state PAC (ID#:_ Murray, Londi & Dave Contributor address; City; State; Zip Code 1904 Georgia Landing Cove Austin, TX 78746)		Amount of Contribution (\$)	6263.47
	Principal occu none	pation / Job title (See Instructions)	Employer (See Instructions none	s)		
	Date 09/18/2020	Full name of contributor out-of-state PAC (ID#:_ Myers, Amanda Contributor address; City; State; Zip Code 2411 McCall Road			Amount of Contribution (\$) \$1	,052.95
	Principal occu Real estate	Austin, TX 78703 pation / Job title (See Instructions)	Employer (See Instructions Self-employed	<u> </u> s)		
	Date 09/17/2020	Full name of contributor out-of-state PAC (ID#:_ Newberry, Ronald Contributor address; City; State; Zip Code 9501 Capital of TX Hwy Ste 302 Austin, TX 78759)		Amount of Contribution (\$)	\$105.58
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions AccountAbility	6)		
	Date 10/29/2020	Full name of contributor out-of-state PAC (ID#:_Nilson, Bo Contributor address; City; State; Zip Code 6401 Rialto Blvd. 1609 Austin, TX 78735			Amount of Contribution (\$)	\$52.95
	Principal occu Construction	pation / Job title (See Instructions) Mgmt	Employer (See Instructions N/A	s)		
	Construction	Wignit	IWA			

	MONEI	ARY POLITICAL CONTRIBUTI	Or	NS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 23/34 Rpt: 27/72	
2	FILER NAME	FILER NAME Your Minute is Up		3	Filer ID (Ethics Commission 00090507	on Filers)	
_		<u> </u>			ļ_		
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 10/06/2020 Oates, Andrea		<u> </u>	Amount of Contribution (\$)	\$52.95		
		6 Contributor address; City; State; Zip Code12815 River Bnd					
		Austin, TX 78732					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Account Mar	ager		personal			
	Date	Full name of contributor ut-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	10/24/2020	Ogden, Susan					\$131.89
		Contributor address; City; State; Zip Code			1		
		2302 West 10th					
	5	Austin, TX 78703			Ĺ		
	Owner	pation / Job title (See Instructions)		Employer (See Instructions Self—Landlord	5)		
					_		
	Date 12/14/2020	Full name of contributor ut-of-state PAC (ID Ogden, Susan	#:)		Amount of Contribution (\$)	\$5,000.00
	Contributor address; City; State; Zip Code		-		\$5,000.00		
		2302 West 10th					
		2002 West 10th					
		Austin, TX 78703					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Owner			Susan Ogden			
	Date	Full name of contributor ut-of-state PAC (ID	#:			Amount of Contribution (\$)	
	10/30/2020	Overton, Ophelia					\$26.63
		Contributor address; City; State; Zip Code			1		
		10610 Morado Circle 2428					
		Austin, TX 78759					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Regional dire	ector		Young Americans for Li	ber	ty	
	Date	Full name of contributor ut-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	10/14/2020	Ozen, Kara					\$237.16
		Contributor address; City; State; Zip Code]		
		2525 West Anderson Lane					
		STE B-1					
	Dringinal agent	Austin, TX 78757		Employer (Soc Instructions	·/		
	Owner	pation / Job title (See Instructions)		Employer (See Instructions Ozen Salon And Spa of		stin	
_	OWNIE			Ozen Salon And Spa of	Αυ	Juil	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 24/34 Rpt: 28/72	
2	FILER NAME Your Minute	is Un		3	Filer ID (Ethics Commission 00090507	n Filers)
4	Date 09/18/2020	 5 Full name of contributor out-of-state PAC (ID#:_Pena, Julie 6 Contributor address; City; State; Zip Code 12300 lostwood Cir 		7	Amount of Contribution (\$)	\$105.58
		Austin, TX 78748				
8	Principal occu Sales Directo	pation / Job title (See Instructions) or	9 Employer (See Instructions Principal)		
	Date 09/22/2020	Full name of contributor out-of-state PAC (ID#:_ Penry, Steven Contributor address; City; State; Zip Code 2618 Nature View Loop Driftwood, TX 78619)		Amount of Contribution (\$)	\$105.58
	Principal occu Sales rep	pation / Job title (See Instructions)	Employer (See Instructions company)		
	Date 09/22/2020	Full name of contributor out-of-state PAC (ID#:_Phillips, Susan Contributor address; City; State; Zip Code 8339 LaPlata Loop Austin, TX 78737			Amount of Contribution (\$)	\$54.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions retired)		
	Date 12/04/2020	Full name of contributor out-of-state PAC (ID#:_ Pomeroy, Allen Contributor address; City; State; Zip Code 1815 Village Oak Ct Austin, TX 78704)		Amount of Contribution (\$)	\$105.58
	Principal occu N/A	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/07/2020	Full name of contributor out-of-state PAC (ID#:_ Powell, Jennifer Contributor address; City; State; Zip Code 1810 Rockcliff Rd)		Amount of Contribution (\$)	\$26.63
	Principal occu N/A	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 25/34 Rpt: 29/72	
2	FILER NAME Your Minute			3	Filer ID (Ethics Commission 00090507	n Filers)
4		 5 Full name of contributor		7	Amount of Contribution (\$)	\$52.95
8	Principal occu	Austin, TX 79736 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	Project Mana		DWH	,		
	Date 10/15/2020	Full name of contributor out-of-state PAC (ID#:_Railey, James Contributor address; City; State; Zip Code 10300 Jollyville Rd Apt 520 Austin, TX 78759			Amount of Contribution (\$)	\$26.63
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	i)		
	Date 10/19/2020	Full name of contributor out-of-state PAC (ID#:_Rauls, Douglass Contributor address; City; State; Zip Code 2301 Matterhorn Ln			Amount of Contribution (\$)	\$105.58
	Principal occu	Austin, TX 78704 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Owner		Self Employed			
	Date 09/22/2020	Full name of contributor out-of-state PAC (ID#:_ Redfern, Ryan Contributor address; City; State; Zip Code 7501 Shadowridge Run 146 Austin, TX 78749)		Amount of Contribution (\$)	\$263.47
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions CBRM	5)		
	Date 10/28/2020	Full name of contributor out-of-state PAC (ID#:_ Reeves-Cavaliero, Kristie Contributor address; City; State; Zip Code 12200 Terraza Circle Austin, TX 78726			Amount of Contribution (\$)	\$237.16
		pation / Job title (See Instructions) rector of Field Medical	Employer (See Instructions Novartis Medical Affairs	<u>(</u>		

	MONEI	ARY POLITICAL (CONTRIBUTIO	λV	IS		SCHEDULE	A1
	The Instruc	ction Guide explains hov	w to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 26/34 Rpt: 30/72	
2	FILER NAME			3	Filer ID (Ethics Commission 00090507	Filers)		
	Your Minute					L		
4	Date 12/03/2020	5 Full name of contributor Reynolds, Joseph	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$52.95
		6 Contributor address; City; S 2611 West 49th St	State; Zip Code					
		Austin, TX 78731						
8	Principal occu Retired	pation / Job title (See Instruction	s)	9	Employer (See Instructions Retired	s)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/19/2020	Rhodes, Kris	L				`,	\$52.95
		Contributor address; City; S	State; Zip Code			1		
		9901 Ullswater lane	·					
		Austin, TX 78750						
	Principal occu	pation / Job title (See Instruction	s)		Employer (See Instructions	5)		
	N/A				N/A			
	Date	Full name of contributor	out-of-state PAC (ID#:_	_)		Amount of Contribution (\$)	
	09/19/2020	Richarte, Steve	_					\$26.63
	Contributor address; City; State; Zip Code		1					
		910 Stillhouse Springs						
		Round Rock, TX 78681						
		pation / Job title (See Instruction	s)		Employer (See Instructions	s)		
	Precision Op	perator 2			DJO Surgical			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/24/2020	Rittenhouse, Margaret						\$52.95
	•	Contributor address; City; S	State; Zip Code			1		
		915 Ken Street						
		Austin, TX 78758						
	Principal occu	pation / Job title (See Instruction	s)		Employer (See Instructions	5)		
	Firm Adminis	strator/Accountant			Law firm			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/22/2020	Rouse, Jennifer	_					\$79.26
		Contributor address; City; S	State; Zip Code			1		
		2316 Sully Creek Dr						
		A TV 70740						
	Drineinal	Austin, TX 78748	0)	_	Employer (Con Instruction	<u>'</u>		
		pation / Job title (See Instruction	S)		Employer (See Instructions Forrester	s)		
	Marketing Ar	iaiyət			LOHESIEI			

	MONET	ARY POLITICAL CONTRIBUTIO	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 27/34 Rpt: 31/72
2	FILER NAME Your Minute			3 Filer ID (Ethics Commission Filers) 00090507
4	Date 10/20/2020	 Full name of contributor out-of-state PAC (ID#:_ Ryan, Reese Contributor address; City; State; Zip Code 3400 East Palm Valley Blvd 		7 Amount of Contribution (\$) \$526.63
		Round Rock, TX 78665		
8	Principal occu CEO	pation / Job title (See Instructions)	9 Employer (See Instructions RSB	5)
	Date 10/22/2020	Full name of contributor out-of-state PAC (ID#:_Salazar, April Contributor address; City; State; Zip Code 11282 Taylor Draper Lane Apt 721 Austin, TX 78759		Amount of Contribution (\$) \$237.16
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Salazar Construction an	
	Date 09/24/2020	Full name of contributor out-of-state PAC (ID#:_ Sanchez, George Contributor address; City; State; Zip Code 3905 Walsh Ranch Blvd		Amount of Contribution (\$) \$105.58
	Principal occu Owner	Round Rock, TX 78681 pation / Job title (See Instructions)	Employer (See Instructions BrightStar Care	<u> </u>
	Date 09/20/2020	Contributor address; City; State; Zip Code 6628 Haswell Ln		Amount of Contribution (\$) \$100.00
	Principal occu Retired	Austin, TX 78749 pation / Job title (See Instructions)	Employer (See Instructions Retired	<u> </u>
	Date 09/21/2020	Full name of contributor out-of-state PAC (ID#:_ Sautter, Bethany Contributor address; City; State; Zip Code 13400 Briarwick Dr Unit 1705 Austin, TX 78729		Amount of Contribution (\$) \$26.63
	Principal occu Sales	pation / Job title (See Instructions)	Employer (See Instructions Cloudflare	;)
		•		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 28/34 Rpt: 32/72	
2	FILER NAME Your Minute			3	Filer ID (Ethics Commission 00090507	n Filers)
4	Date 09/24/2020	 Full name of contributor out-of-state PAC (ID#:_ Segina, Richard Contributor address; City; State; Zip Code 4210 Canoas Dr)	7	Amount of Contribution (\$)	\$105.58
8	Principal occu	Austin, TX 78730 pation / Job title (See Instructions)	9 Employer (See Instructions	·/		
0	General Mar		Stryker	·)		
	Date 10/15/2020	Full name of contributor out-of-state PAC (ID#:_ Serna, Janet Contributor address; City; State; Zip Code PO Box 50258 Austin, TX 78763			Amount of Contribution (\$)	\$26.63
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date 12/22/2020	Full name of contributor out-of-state PAC (ID#:_ Shafer, Rebecca Contributor address; City; State; Zip Code 3100 Evanston Ln Austin, TX 78745			Amount of Contribution (\$)	\$26.63
	Principal occu Self employe	pation / Job title (See Instructions)	Employer (See Instructions Self employed	<u>I</u> 5)		
	Date 11/04/2020	Full name of contributor out-of-state PAC (ID#:_ Shakespeare, Steven Contributor address; City; State; Zip Code 3108 Wild Canyon Loop Austin, TX 78732			Amount of Contribution (\$)	\$225.00
	Principal occu Sales	pation / Job title (See Instructions)	Employer (See Instructions US Money Reserves	5)		
	Date 10/15/2020	Full name of contributor out-of-state PAC (ID#:_Shepherd, Jim Contributor address; City; State; Zip Code 4825 Chadbury Cove Austin, TX 78727			Amount of Contribution (\$)	\$105.58
	Principal occu N/A	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONEI	ARY POLITICAL CONTRIBUT	IOI	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	s foi	rm.	1	Total pages Schedule A1: Sch: 29/34 Rpt: 33/72	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)	
	Your Minute				┖	00090507	
4	Date 09/21/2020	5 Full name of contributor out-of-state PAC (IE Shields, Deacon	D#:)	7	Amount of Contribution (\$)	\$52.95
		6 Contributor address; City; State; Zip Code 2813 Rio Grande					
		Austin, TX 78705					
8	Principal occu Principal	oation / Job title (See Instructions)	9	Employer (See Instructions Blue Water Fund	s)		
	Date	Full name of contributor out-of-state PAC (ID	D#:)	Π	Amount of Contribution (\$)	
	10/18/2020	Silvas, Joseph		_			\$105.58
		Contributor address; City; State; Zip Code			1		
		2865 Kingsbury Ave					
		Richland Hills, TX 76118					
	Principal occu	pation / Job title (See Instructions)	\top	Employer (See Instructions	<u> </u>		
	Recruiter	,		Self	,		
	Date	Full name of contributor out-of-state PAC (IE	D#:)		Amount of Contribution (\$)	
	11/04/2020	4/2020 Song, Jennifer					\$225.00
		Contributor address; City; State; Zip Code					
		na					
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	N/A			N/A			
	Date	Full name of contributor ut-of-state PAC (IE	D#:)		Amount of Contribution (\$)	
	09/18/2020	Southwell, Brent					\$500.00
		Contributor address; City; State; Zip Code					
		3658 Glen Haven Blvd					
		Houston, TX 77025					
		pation / Job title (See Instructions)		Employer (See Instructions	s)		
	business ow	ner		self employed			
	Date	Full name of contributor out-of-state PAC (IE	D#:)		Amount of Contribution (\$)	***
	10/23/2020	Stevens, P. Diane					\$26.63
		Contributor address; City; State; Zip Code 5744 Republic of TX. Blvd.					
		5744 Republic Of TA. Bivu.					
		Austin, TX 78735					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Owner			Self employed			

	MONEI	ARY POLITICAL CONTI	RIBUTION	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to com	plete this for	m.	1	Total pages Schedule A1: Sch: 30/34 Rpt: 34/72	
2	FILER NAME Your Minute			3	Filer ID (Ethics Commission 00090507	n Filers)	
1			7	Amount of Contribution (\$)			
4	09/23/2020 Swail, Bradley		ľ	Amount of Continuation (\$)	\$54.00		
		6 Contributor address; City; State; Zip Co 1511 Wilson Heights Dr	ode				
		Austin, TX 78746					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Host/Produc	er		Austin City Councilman	Ро	dcast	
	Date	Full name of contributor out-of-	state PAC (ID#:)		Amount of Contribution (\$)	
	10/22/2020	Swift, Douglas					\$210.84
		Contributor address; City; State; Zip Co	ode				
		1803 Elton Ln					
		Austin, TX 78703					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	President			Vista Disposal			
	Date	Full name of contributor out-of-	state PAC (ID#:)		Amount of Contribution (\$)	
	12/07/2020	Taylor, Kendrick					\$105.58
	Contributor address; City; State; Zip Code						
		1064 Belfast Lane					
		Ventura, CA 93001-3813			<u>L</u>		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	N/A			N/A			
	Date	-	state PAC (ID#:)		Amount of Contribution (\$)	
	10/25/2020	Terreson, David					\$105.58
		Contributor address; City; State; Zip Co	ode				
		3812 Agape Lane					
		Austin, TX 78735					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Physician			Cardiotexas			
	Date	Full name of contributor out-of-	state PAC (ID#:)		Amount of Contribution (\$)	
	12/25/2020	Thomas, Troy					\$105.58
		Contributor address; City; State; Zip Co	ode				
		108 Hensley Circle					
		Austin, TX 78738					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Executive			Samsung			
_			<u> </u>				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 31/34 Rpt: 35/72	
2	FILER NAME Your Minute	is Up		3	Filer ID (Ethics Commission 00090507	n Filers)
4	Date 09/19/2020	 Full name of contributor			Amount of Contribution (\$)	\$52.95
		12100 Metric Blvd #1734 Austin, TX 78758				
8	Principal occu CST	pation / Job title (See Instructions)	9 Employer (See Instructions Surgery Center	i)		
	Date 10/14/2020	Full name of contributor out-of-state PAC (ID#:_ Torba, Denise Contributor address; City; State; Zip Code 12100 Metric Blvd #1734 Austin, TX 78758			Amount of Contribution (\$)	\$131.89
	Principal occu CST	pation / Job title (See Instructions)	Employer (See Instructions Surgery Center)		
	Date 09/25/2020	Full name of contributor out-of-state PAC (ID#:_ Truong, Minh Contributor address; City; State; Zip Code 11217 Matisse Trail)		Amount of Contribution (\$)	\$26.63
	Principal occu	Austin, TX 78726 pation / Job title (See Instructions)	Employer (See Instructions) 		
	Not disclose	patient y des title (eee metadetens)	Not disclose	,		
	Date 12/30/2020	Contributor address; City; State; Zip Code 305 Vale St			Amount of Contribution (\$)	\$100.00
	Principal occu	Rollingwood, TX 78746 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	N/A		Retired			
	Date 09/20/2020	Full name of contributor out-of-state PAC (ID#:_Veith, Christine Contributor address; City; State; Zip Code 5632 Republic of Texas Blvd Austin, TX 78735			Amount of Contribution (\$)	\$26.63
	Principal occu N/A	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 32/34 Rpt: 36/72	
2	FILER NAME Your Minute			Filer ID (Ethics Commission 00090507	n Filers)	
4	Date 10/21/2020	 5 Full name of contributor out-of-state PAC (ID#:_Veith, Christine 6 Contributor address; City; State; Zip Code 5632 Republic of Texas Blvd Austin, TX 78735)	7	Amount of Contribution (\$)	\$26.63
8	Principal occu N/A	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 10/07/2020	Full name of contributor out-of-state PAC (ID#:_ Veri, Catherine Contributor address; City; State; Zip Code 6709 Magenta Ln Austin, TX 78739			Amount of Contribution (\$)	\$52.95
	Principal occu Consultant	pation / Job title (See Instructions)	Employer (See Instructions Marketecture)		
	Date 10/18/2020	Full name of contributor out-of-state PAC (ID#:_ Veri, Catherine Contributor address; City; State; Zip Code 6709 Magenta Ln Austin, TX 78739			Amount of Contribution (\$)	\$237.16
	Principal occu Consultant	pation / Job title (See Instructions)	Employer (See Instructions Marketecture)		
	Date 10/10/2020	Full name of contributor out-of-state PAC (ID#:_Webb, Candace Contributor address; City; State; Zip Code 2208 A West Stassney Lane Austin, TX 78745			Amount of Contribution (\$)	\$26.63
	Principal occu Credentialing	pation / Job title (See Instructions) g Specialist	Employer (See Instructions CBHE)		
	Date 10/07/2020	Full name of contributor out-of-state PAC (ID#:_ Weideman, Dawn Contributor address; City; State; Zip Code 5002 Dry Oak Trail Austin, TX 78749)		Amount of Contribution (\$)	\$200.00
	Principal occu NA	pation / Job title (See Instructions)	Employer (See Instructions NA)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUL	■ A1	
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 33/34 Rpt: 37/72	
2	FILER NAME Your Minute	is Up		3	Filer ID (Ethics Commission 00090507	n Filers)
4	Date 11/20/2020	Date 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$105.58
		Austin, TX 78746				
8	Principal occu N/A	pation / Job title (See Instructions)	Employer (See Instructions N/A	5)		
	Date 10/20/2020	Full name of contributor out-of-state PAC (ID#: Williams, Samantha Contributor address; City; State; Zip Code 10801 Laurel Creek Dr Austin, TX 78726			Amount of Contribution (\$)	\$237.16
	Principal occu Home mana	pation / Job title (See Instructions) ger	Employer (See Instructions N/A	5)		
	Date 09/21/2020	Full name of contributor out-of-state PAC (ID#: Willis, David Contributor address; City; State; Zip Code 5201 Avon Pl			Amount of Contribution (\$)	\$105.58
	Principal occu	Austin, TX 78723 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 09/22/2020	Full name of contributor out-of-state PAC (ID#: Wolfe, Leigh Contributor address; City; State; Zip Code 105 Timber Ridge Cv Austin, TX 78733	N/A		Amount of Contribution (\$)	\$79.26
	Principal occu Therapist	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed	5)		
	Date 10/19/2020	Full name of contributor out-of-state PAC (ID#: Wood, Brian Contributor address; City; State; Zip Code 5002 Sevan Cv. Austin, TX 78731			Amount of Contribution (\$)	\$263.47
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		

	MONET	TARY POLITICAL CONTRIBUTION	SCHEDULE A			
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 34/34 Rpt: 38/72		
2	FILER NAME Your Minute			3	Filer ID (Ethics Commission 00090507	on Filers)
4	Date 10/13/2020	Date 5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$263.47
8	Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date 12/07/2020	Full name of contributor out-of-state PAC (ID#:_ Wright, Ouida Contributor address; City; State; Zip Code 3406 Shinoak Dr. Austin, TX 78731			Amount of Contribution (\$)	\$50.00
	Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date 09/21/2020	Full name of contributor out-of-state PAC (ID#:_Yukich, Amy Contributor address; City; State; Zip Code 2900 N Quinlan Park Rd Suite 240-345 Austin, TX 78732			Amount of Contribution (\$)	\$105.58
	Principal occu Self	upation / Job title (See Instructions)	Employer (See Instructions	5)		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 39/72 FILER NAME 3 Filer ID (Ethics Commission Filers) Your Minute is Up 00090507 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 09/15/2020 Frick, Daniel (Mr.) \$51.17 I 7 Contributor address; City; State; Zip Code 3209 IH 35 South APT 1032 Austin, TX 78741 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) self self 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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 Full name of contributor Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 09/21/2020 Frick, Daniel (Mr.) \$31.86 Wordpress, Domain Contributor address; City; State; Zip Code Registration 3209 IH 35 South APT 1032 Austin, TX 78741 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) 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)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Credit Card Payment	The Instruction Guide explains how to cor	Ü	ete this form.
1	Total pages Schedule F1:	•	-	3 Filer ID (Ethics Commission Filers)
	Sch: 1/33 Rpt: 40/72	Your Minute is Up		00090507
4	Date	5 Payee name		
	10/12/2020	Academy		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$97.40	12250 Research Blvd		
		Austin, TX 78759		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Solicitation/Fundraising Expense		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE			Check if Austin, TX, officeholder living expense
				campaign supplies
_	Complete ONL V if direct	Condidate/Officeholder name Office sour	abt	Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	gnı	Office field
_				
	Date	Payee name		
	10/26/2020	Academy		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$50.86	12250 Research Blvd		
		Austin, TX 78759		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Solicitation/Fundraising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense campaign supplies
				Campaign Supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI		9	Cinds hold
H	Date	Payee name		
	10/08/2020	Amazon		
	Amount (\$)	Payee address; City; State; Zip Coo	da	
	\$62.36	4616 W Howard Ln	ue	
	Ψ02.30	4010 W Howard En		
		Austin, TX 78728		
			<i>a</i> \	
	PURPOSE OF	,	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Solicitation/Fundraising Expense		Check if Austin, TX, officeholder living expense
				campaign supplies, bull horns
	Complete ONLY if direct	Candidate/Officeholder name Office sout	ght	Office held
	expenditure to benefit C/OI	1		
ı				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to c	ompl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 2/33 Rpt: 41/72	Your Minute is Up		00090507
4	Date	5 Payee name		<u> </u>
	11/01/2020	Amazon		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$75.74	4616 W Howard Ln		
		Austin, TX 78728		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Solicitation/Fundraising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense campaign supplies
l				campaign supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office so	uaht	Office held
ľ	expenditure to benefit C/OI		agiit	Cince Hold
⊨	Date	Payee name		
	11/01/2020	Amazon		
	Amount (\$)	Payee address; City; State; Zip C	ode.	
	\$55.15	4616 W Howard Ln	oue	
l	Ψ33.13	4010 W Howard Ell		
l		Auctin TV 70720		
L	5,155,055	Austin, TX 78728	Las	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(a)	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Solicitation/Fundraising Expense		Check if Austin, TX, officeholder living expense
l				campaign supplies
L				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught	Office held
L	experialitire to beliefit C/Oi	1		
	Date	Payee name		
	11/23/2020	Bevil, Josh		
	Amount (\$)	Payee address; City; State; Zip C	ode	
l	\$500.00	9100 Mountain Ride Dr.		
l		4C		
l		Austin, TX 78759		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
l				Check if Austin, TX, officeholder living expense contracted work
				Somulation work
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office so	l ught	Office held
	expenditure to benefit C/OI			

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/33 Rpt: 42/72	Your Minute is Up 00090507	
4	Date	5 Payee name	
	11/05/2020	Brown, Jason	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$150.00	PO Box 5461	
		Ketchikan, AR 99901	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, efficiended by the ingression of the same	
		Check if Austin, TX, officeholder living expense sign holder	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
	Date	Payee name	
	11/03/2020	COA Parking Meters	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$38.71	downtown	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense parking expense	
		parking expense	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
	Date	Payee name	
	10/05/2020	Casa Chapala	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$724.02	9041 Research Blvd	
		Ste 100	
		Austin, TX 78758	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense food provided for volunteers	
		1000 provided for Volunteers	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	н	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/33 Rpt: 43/72	Your Minute is Up 00090507
4	Date	5 Payee name
	11/04/2020	Castanede, Ashley
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$150.00	611 Conway Dr
		San Marcos, TX 78666
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense sign holder
		Sign Holder
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
\vdash	Date	Davies same
		Payee name
	11/01/2020	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$148.47	10401 Research Blvd
		Austin, TX 78759
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense food provided for volunteers
		lood provided for volunteers
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	B
	Date	Payee name Cringeliet
	10/26/2020	Criagslist
	Amount (\$)	Payee address; City; State; Zip Code
	\$7.00	na
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense Advertising & Marketing
		Advertising & warketing
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/33 Rpt: 44/72	Your Minute is Up 00090507
4	Date	5 Payee name
	11/03/2020	Domino's Pizza
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$181.73	8141 Mesa Dr
		Ste C
		Austin, TX 78759
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		food provided for volunteers
_	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
\models	Data	
	Date	Payee name
	11/22/2020	EZ Texting
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.00	na
		Austin, TX 78758
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense communication platform within work staff
		communication platform within work stair
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	11/22/2020	EZ Texting
	Amount (\$)	
	\$40.00	na
		Averting TV 70750
		Austin, TX 78758
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Pental Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		communication platform within work staff
		genmaniesaen plaasini inami ilem stali
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/33 Rpt: 45/72	Your Minute is Up 00090507
4	Date	5 Payee name
	11/22/2020	EZ Texting
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.00	na
		Austin, TX 78758
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense communication platform within work staff
		communication platform within work stair
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
-	Date	Power name
	11/26/2020	Payee name EZ Texting
		-
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.00	na
		Austin, TX 78758
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense communication platform within work staff
		Communication platform within work start
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	11/26/2020	Payee name EZ Texting
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.00	na
		Austin, TX 78758
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		communication platform within work staff
		Seminanies de Pisace de Transcribe de Carrette de Carr
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	-
	Sch: 7/33 Rpt: 46/72	Your Minute is Up 00090507	
4	Date	5 Payee name	_
	11/29/2020	EZ Texting	
6	Amount (\$)	7 Payee address; City; State; Zip Code	-
	\$5.00	na	
		Austin, TX 78758	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	-
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITORE	Check if Austin, TX, officeholder living expense	
		communication platform within work staff	
Ļ	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
9	Complete ONLY if direct expenditure to benefit C/OH		
⊨	Data		=
	Date 11/30/2020	Payee name EZ Texting	
L		-	_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$6.48	na	
		A = V = 0==0	
		Austin, TX 78758	_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		communication platform within work staff	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	1	
	Date	Payee name	
	11/30/2020	EZ Texting	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$40.00	na	
		Austin, TX 78758	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense communication platform within work staff	
		communication platform within work stall	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/O		
\vdash			-

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 8/33 Rpt: 47/72	Your Minute is Up 00090507
4	Date	5 Payee name
	12/03/2020	EZ Texting
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.44	na
		Austin, TX 78758
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		communication platform within work staff
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
_	Date	Payee name
	12/03/2020	EZ Texting
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.00	na
		Austin, TX 78758
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		communication platform within work staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/03/2020	EZ Texting
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.00	na
		Austin, TX 78758
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		communication platform within work staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment		The Instruction Guide explains how to co	mple	lete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 9/33 Rpt: 48/72		Your Minute is Up		00090507
4	Date	5	Payee name		·
	12/06/2020		EZ Texting		
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode	
	\$36.25		na		
			Austin, TX 78758		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE				Check if Austin, TX, officeholder living expense
					communication platform within work staff
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office sou	ıaht	Office held
ľ	expenditure to benefit C/OI		Sandidate/Officerolder Harne Office 300	agrit	Since field
_	Date	Г	Davida nama		
	12/06/2020		Payee name EZ Texting		
		┝		odo	
	Amount (\$) \$14.32		Payee address; City; State; Zip Co	Jue	
	Φ14.32		Πα		
			A TV 70750		
			Austin, TX 78758		
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense
					communication platform within work staff
	Complete ONLY if direct		Candidate/Officeholder name Office sou	ıght	Office held
	expenditure to benefit C/OI	Н			
	Date		Payee name		
	12/06/2020		EZ Texting		
	Amount (\$)		Payee address; City; State; Zip Co	ode	
	\$5.00		na		
			Austin, TX 78758		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE				Check if Austin, TX, officeholder living expense
					communication platform within work staff
	Opening the ONLY if allowed	L,	Office and date of the second		Office held
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name Office sou	ignt	Office held
	•				

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to comp	plete thi	is form.		
1	Total pages Schedule F1:				Filer ID	(Ethics Commission Filers)
	Sch: 10/33 Rpt: 49/72	Your Minute is Up			00090507	
4	Date	5 Payee name				
_	12/06/2020	EZ Texting				
6	Amount (\$)	7 Payee address; City; State; Zip Code	9			
	\$40.00	na				
		Austin, TX 78758				
8	PURPOSE		N Deer	- vinting		
°	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Deso ☐ C	cription Check if travel outsid	de of Texas. Com	plete Schedule T.
	EXPENDITURE	Omeo overnead/Northal Expense	_	Check if Austin, TX,		
			com	nmunication p	olatform with	nin work staff
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	<u>, t</u>		Office he	old
9	expenditure to benefit C/OI		IL		Office file	eiu
⊨	Date	Payee name				
	12/08/2020	EZ Texting				
_	Amount (\$)	Payee address; City; State; Zip Code	9			
	\$5.00	na				
		Austin, TX 78758				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)) Desc	cription		
	OF EXPENDITURE	Office Overhead/Rental Expense	_	Check if travel outsid		
				Check if Austin, TX, nmunication p		
			COIII	mameadon	Jianomii win	iiii work stari
	Complete ONLY if direct	Candidate/Officeholder name Office sought	nt		Office he	eld
	expenditure to benefit C/OI	1				
	Date	Payee name				
	12/08/2020	EZ Texting				
	Amount (\$)	Payee address; City; State; Zip Code	Э			
	\$40.00	na				
		Austin, TX 78758				
	PURPOSE OF	` · · · · · · · · · · · · · · · · · · ·	Desc		de of Toylog Com	plata Cabadula T
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outsion Check if Austin, TX,		
				nmunication p		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	nt		Office he	eld
	expenditure to benefit C/OI	1				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Political Committe Credit Card Payment		v to complete this form.	OTHER (enter a category not listed above)
1 Total pages Schedule F1: 2 FILE	ER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 11/33 Rpt: 50/72 You	ur Minute is Up		00090507
4 Date 5 Pay	vee name		
12/14/2020 EZ	Texting		
\$40.00 na	vee address; City; State; Z	ip Code	
8 PURPOSE (a) Cate	egory (See Categories listed at the top of this schedu	(b) Description	
	ice Overhead/Rental Expense	Check if travel Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense on platform within work staff
Complete ONLY if direct Cand expenditure to benefit C/OH	lidate/Officeholder name Offic	ce sought	Office held
Date Pay	ree name		
12/21/2020 EZ	Texting		
Amount (\$) Pay \$5.00 na	ree address; City; State; Z	lip Code	
	stin, TX 78758		
l OE I	egory (See Categories listed at the top of this schedu ice Overhead/Rental Expense	Check if travel Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense on platform within work staff
Complete <u>ONLY</u> if direct Cand expenditure to benefit C/OH	lidate/Officeholder name Offic	ce sought	Office held
Date Pay	ree name		
12/21/2020 EZ	Texting		
Amount (\$) Pay \$40.00 na	ree address; City; State; Z	lip Code	
Aus	stin, TX 78758		
I 0F I	egory (See Categories listed at the top of this schedu ice Overhead/Rental Expense	Check if travel Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense on platform within work staff
Complete ONLY if direct Cand expenditure to benefit C/OH	lidate/Officeholder name Office	ce sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Political Co Credit Card Payment		laries/Wages/Contract Labor to complete this form.	OTHER (enter a category not listed above)
1 Total pages Schedule F1: 2	FILER NAME	3	Filer ID (Ethics Commission Filers)
Sch: 12/33 Rpt: 51/72	Your Minute is Up		00090507
4 Date 5	Payee name		
12/29/2020	EZ Texting		
6 Amount (\$) 7	Payee address; City; State; Z na Austin, TX 78758	ip Code	
8 PURPOSE (a)) Category (See Categories listed at the top of this schedul	(b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outsin Check if Austin, TX,	de of Texas. Complete Schedule T. officeholder living expense platform within work staff
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office	e sought	Office held
Date	Payee name		
12/29/2020	EZ Texting		
Amount (\$) \$5.00	Payee address; City; State; Z na	ip Code	
	Austin, TX 78758		
PURPOSE (a) OF EXPENDITURE	 O Category (See Categories listed at the top of this schedul Office Overhead/Rental Expense 	Check if travel outsin Check if Austin, TX,	de of Texas. Complete Schedule T. , officeholder living expense platform within work staff
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office	e sought	Office held
Date 09/27/2020	Payee name Eagle Office		
Amount (\$) \$596.17	Payee address; City; State; Z 221 Texas Ave Ste B Round Rock, TX 78664	ip Code	
PURPOSE OF EXPENDITURE	O) Category (See Categories listed at the top of this schedul Advertising Expense	Check if travel outsi	de of Texas. Complete Schedule T. officeholder living expense NSE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office	e sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

e Travel in
Contract Labor OTHER (

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal S		•		Vages	/Contract Labor			THER (enter a		y not listed above)	
_	Total marca Cabadula F1.	1								12		ler ID	/Ethi	as Commission Filora)	_
	Total pages Schedule F1:									3			(Euiid	cs Commission Filers)	
	Sch: 13/33 Rpt: 52/72		Your Minute	e is Up	p						00	0090507			
4	Date	5	Payee name												
	10/05/2020		Eagle Offic	е											
6	Amount (\$)	7	Payee addre	SS:	City;	State	e; Zip Co	ode							-
	\$147.22		221 Texas		,		-, -,-								
	4111.22		Ste B	, , , ,											
			Round Roc	k, IX	78664										
8	PURPOSE	(a)	Category (S	ee Categ	gories listed at tl	he top of this so	hedule)	(b)	Description						
	OF EXPENDITURE		Advertising	Expe	nse				Check if travel						
									Check if Austin				g expens	se	
									Advertising e	xpe	ens	se			
9	Complete ONLY if direct		Candidate/Off	iceholo	der name		Office sou	ght				Office h	eld		
	expenditure to benefit C/O	Η													
	Date		Payee name												=
	10/05/2020		Eagle Offic												
_	Amount (\$)	┝	Payee addre		City	State	e; Zip Co	ndo.							_
	• ,		•		City;	Siali	ε, Ζι ρ Οι	ue							
	\$53.10		221 Texas	Ave											
			Ste B												
			Round Roc	k, TX	78664										
	PURPOSE	(a)	Category (S	ee Categ	gories listed at t	he top of this so	hedule)	(b)	Description						
	OF EXPENDITURE		Advertising				ŕ		Check if travel	outs	ide (of Texas. Com	plete Sc	chedule T.	
	EXPENDITURE		J	•					Check if Austin	ı, TX	, off	iceholder living	g expens	se	
									Advertising e	xpe	ens	se			
	Complete ONLY if direct		Candidate/Off	icehold	der name		Office sou	ght				Office he	eld		
	expenditure to benefit C/O	Н													
	Date		Payee name												_
	10/05/2020		Eagle Offic	е											
	Amount (\$)	\vdash	Payee addre		City;	State	e; Zip Co	nde							_
	\$290.47		221 Texas		City,	State	-, Δip Cc	uc							
	φ290.47			Ave											
			Ste B												
			Round Roc	k, TX	78664										
	PURPOSE	(a)	Category (S	ee Categ	gories listed at t	he top of this so	chedule)	(b)	Description						
	OF EXPENDITURE		Advertising						Check if travel						
	LAFLINDITORL								Check if Austin				g expens	se	
									Advertising e	xpe	ens	se			
	Complete ONLY if direct		Candidate/Off	iceholo	der name		Office sou	ght	<u> </u>			Office h	eld		_
	expenditure to benefit C/O	Η													
•															

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/33 Rpt: 53/72	Your Minute is Up 00090507
4	Date	5 Payee name
	10/05/2020	Eagle Office
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$345.37	221 Texas Ave
		Ste B
		Round Rock, TX 78664
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Advertising expense
		Advertising expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/19/2020	Eagle Office
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,869.48	221 Texas Ave
		Ste B
		Round Rock, TX 78664
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Advertising & Marketing
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/19/2020	Eagle Office
	Amount (\$)	Payee address; City; State; Zip Code
	\$283.67	221 Texas Ave
		Ste B
		Round Rock, TX 78664
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Advertising & Marketing
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 15/33 Rpt: 54/72	2 FILER NAME Your Minute is Up 3 Filer ID (Ethics Commission Filers) 00090507	
4	Date 10/19/2020	5 Payee name Eagle Office	
	Amount (\$) \$183.75	7 Payee address; City; State; Zip Code 221 Texas Ave Ste B Round Rock, TX 78664	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising & Marketing	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date 10/19/2020	Payee name Eagle Office	
	Amount (\$) \$1,055.27	Payee address; City; State; Zip Code 221 Texas Ave Ste B Round Rock, TX 78664	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising & Marketing	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date 11/02/2020	Payee name Eagle Office	
	Amount (\$) \$141.05	Payee address; City; State; Zip Code 221 Texas Ave Ste B Round Rock, TX 78664	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising & Marketing	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
			_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/33 Rpt: 55/72	Your Minute is Up 00090507
4	Date	5 Payee name
	11/02/2020	Eagle Office
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$233.17	221 Texas Ave
		Ste B
		Round Rock, TX 78664
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Advertising & Marketing
		Advertising & Marketing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/02/2020	Eagle Office
	Amount (\$)	Payee address; City; State; Zip Code
	\$638.94	221 Texas Ave
		Ste B
		Round Rock, TX 78664
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Advertising & Marketing
		, avoid any a marketing
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/02/2020	Eagle Office
	Amount (\$)	Payee address; City; State; Zip Code
	\$816.19	221 Texas Ave
		Ste B
		Round Rock, TX 78664
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	ZA ZIIDII GIAZ	Check if Austin, TX, officeholder living expense
		Advertising & Marketing
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to com	nple	te this form.
1	Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
	Sch: 17/33 Rpt: 56/72	Your Minute is Up		00090507
4	Date	5 Payee name		
_	12/21/2020	Eagle Office		
6	Amount (\$) \$248.08	7 Payee address; City; State; Zip Cod 221 Texas Ave	le	
	φ240.00	Ste B		
		Round Rock, TX 78664		
8	PURPOSE		(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(~)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Advertising & Marketing
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ıht	Office held
	expenditure to benefit C/O		,	C
	Date	Payee name		
	11/11/2020	Frost Bank		
	Amount (\$)	Payee address; City; State; Zip Cod	le	
	\$20.55	3525 Far West Blvd		
		Austin, TX 78731		
	PURPOSE OF	,	(b)	Description
	EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				check printing fee
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht	Office held
	experience to benefit eye.			
	Date	Payee name		
	11/15/2020	Gibson, Adalai		
	Amount (\$) \$500.00	Payee address; City; State; Zip Cod 6601 Rialto Dr	ie	
	Ψ300.00	4004		
		Austin, TX 78735		
	PURPOSE		(b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor	(~)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				contracted work
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ıht	Office held
	expenditure to benefit C/O			555
_				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
tising Expense Event Expense Loan Repayment/Reimbu

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

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

	Credit Card Payment	The Instruction Guide explains how to complete	this form.
1		2 FILER NAME	3 Filer ID (Ethics Commission Filers)
L	Sch: 18/33 Rpt: 57/72	Your Minute is Up	00090507
4		5 Payee name	
L	11/11/2020	Girard Diversified Interests	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$1,016.52	412 Congress Ave	
L		Austin, TX 78701	
8	PURPOSE OF		escription
	EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		R	ecall Adler Ball
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	09/24/2020	Hafer, Robyn	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$150.00	7704 Roland Dr	
		McKinney, TX 75070	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) De	escription
	EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			ogo work
r	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	10/12/2020	Home Depot	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$56.23	1200 Home Depot Blvd	
		Sunset Valley, TX 78745	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	escription
	OF EXPENDITURE	Solicitation/Fundraising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		L Ca	ampaign supplies
一	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
Г			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
•	Sch: 19/33 Rpt: 58/72	Your Minute is Up O0090507	
4	Date	5 Payee name	
	10/15/2020	Home Depot	
6	Amount (\$) \$37.87	7 Payee address; City; State; Zip Code 1200 Home Depot Blvd	
	40 1.0.		
		Sunset, TX 78745	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Solicitation/Fundraising Expense	
		Check if Austin, TX, officeholder living expense	
		campaign supplies	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	11/04/2020	Johnson, Janie	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$150.00	3304 Levy Ln	
		Killeen, TX 76542	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense sign holder	
		Sign notice	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
	10/25/2020	JotForm Inc	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$75.78	111 Pine St	
		Ste 1815	
		San Francisco, CA 94111	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Office Overhead/Rental Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		database platform used to type in all signature	
L		names	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	n	
l			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 20/33 Rpt: 59/72	Your Minute is Up 00090507
4	Date	5 Payee name
	10/25/2020	JotForm Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$31.39	111 Pine St.
		Ste 1815
		San Francisco, CA 94111
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense database platform used to type in all signature
		names
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/24/2020	JotForm Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$107.17	111 Pine St
		Ste 1815
		San Francisco, CA 94111
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		database platform used to type in all signature
		names
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/27/2020	JotForm Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$106.92	111 Pine St
		Ste 1815
		San Francisco, CA 94111
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		database platform used to type in all signature names
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comple	te this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 21/33 Rpt: 60/72	Your Minute is Up	00090507
4	Date	5 Payee name	•
	11/01/2020	LAZ Parking	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$30.00	downtown	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
	LXI ENDITORE		Check if Austin, TX, officeholder living expense
			parking expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/O		Office field
	Data		
	Date	Payee name Lowe's	
	10/12/2020		
	Amount (\$)	Payee address; City; State; Zip Code	
	\$108.08	8000 Shoal Creek Blvd	
		Austin, TX 78757	
	PURPOSE OF	· (,	Description
	EXPENDITURE	Solicitation/Fundraising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			campaign supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	11/15/2020	McMillian, Becky	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3,150.00	6906 Dogwood Hollow	
		•	
		Austin, TX 78750	
	PURPOSE		Description
	OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			salary and travel expenses
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	experientare to beliefit 6/01	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 22/33 Rpt: 61/72	2 FILER NAME Your Minute is Up 3 Filer ID (Ethics Commission Filers) 00090507
4	Date 11/01/2020	5 Payee name Michael's
6	Amount (\$) \$86.56	7 Payee address; City; State; Zip Code 10225 Research Blvd Ste 2000 Austin, TX 78759
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense supplies
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 10/12/2020	Payee name Office Depot
	Amount (\$) \$106.89	Payee address; City; State; Zip Code 701 S Capital of TX Hwy Ste 500 West Lake Hills, TX 78746
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign supplies
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 11/01/2020	Payee name Party City
	Amount (\$) \$62.75	Payee address; City; State; Zip Code 11150 Research Blvd
		Austin, TX 78759
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense supplies for fundraising
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide	Salaries	/Wages	s/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 23/33 Rpt: 62/72	Your Minute	e is Up					00090507	
4	Date	5 Payee name							
	11/03/2020	Pierott, Alic	e						
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip C	ode				
	\$150.00	2609 Rosev	vood Ave						
		4901							
		Austin, TX	78702						
8	PURPOSE OF		ee Categories listed at the to		(b)	Description			
	EXPENDITURE	Salaries/Wa	ages/Contract Labo	r		_		de of Texas. Com , officeholder living	
						sign holder	, 17,	onicendidei iiving	у схрепас
						0.9			
9	Complete ONLY if direct		ceholder name	Office so	ught			Office he	eld
	expenditure to benefit C/OI	-							
	Date	Payee name							
	11/03/2020	Popp, Jeffre	ey						
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$150.00	9052 Galev	ood/						
		119							
		Austin, TX	78758						
	PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description			
	OF EXPENDITURE	Salaries/Wa	ages/Contract Labo	r		=		de of Texas. Com	
						sign holder	, 1,	officeholder living	g expense
						oign noidoi			
	Complete ONLY if direct		ceholder name	Office so	ught			Office he	eld
	expenditure to benefit C/OI	-							
	Date	Payee name							
	11/08/2020	Ramirez, Jo	sefina						
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$150.00	7515 Lazy (Creek Drive						
		Austin, TX	78724				_		
	PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description			
	OF EXPENDITURE	Salaries/Wa	ages/Contract Labo	r				de of Texas. Com	
						Sign holder	, TX,	officeholder living	g expense
						aigii Huluel			
_	Complete ONLY if direct	Candidate/Offi	ceholder name	Office so	<u>l</u> ught			Office he	eld
	expenditure to benefit C/O								

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Ontations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/33 Rpt: 63/72	Your Minute is Up 00090507
4	Date	5 Payee name
	10/01/2020	Restaurant Depot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$344.75	820 Blackson Ave
		Austin, TX 78752
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign supplies
		campaign supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Dete	
	Date	Payee name
	11/04/2020	Schlotzky's
	Amount (\$)	Payee address; City; State; Zip Code
	\$311.41	2545 W. Anderson Lane
		Austin, TX 78757
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense food provided for volunteers
		lood provided for volunteers
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	11/03/2020	Scroggins, David
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	2609 Rosewood Ave
		4901
		Austin, TX 78702
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		sign holder
_	Operation ONE VIII II	On didn't 10 ff a balden name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Fees

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 25/33 Rpt: 64/72	Your Minute is Up	00090507
4	Date	5 Payee name	
	11/03/2020	Smith, Ian	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
•	\$150.00	3415 Hunter Rd.	
		Austin, TX 78664	
8	PURPOSE OF EXPENDITURE	Galaries/ Wages/ Corniract Eabor	outside of Texas. Complete Schedule T. TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/04/2020	Smith, Natalie	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$150.00	3401 W Parmer Ln	
		Austin, TX 78727	
	PURPOSE OF EXPENDITURE	Salaries/ Wages/Contract Labor	outside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date 10/08/2020	Payee name Speakeasy	
	Amount (\$) \$1,903.50	Payee address; City; State; Zip Code 412 Congress Ave	
		Austin, TX 78701	
	PURPOSE OF EXPENDITURE	Event Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense all Adler Ball
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	rms provided by Tayas F	nice Commission www.athics state ty us	Version V2 1 e1016a6a

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to comp	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 26/33 Rpt: 65/72	Your Minute is Up		00090507
4	Date	5 Payee name		
	10/23/2020	Stripe		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$12.16	N/A		
		Austin, TX 78758		
8	PURPOSE OF	, , ,	b) 	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees		Check if Austin, TX, officeholder living expense
				Stripe fee incurred on donations
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt	Office held
	experialiture to benefit C/Oi	1		
	Date	Payee name		
	10/26/2020	Stripe		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$47.95	N/A		
		Austin, TX 78758		
	PURPOSE OF	, ,	b) '	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees		Check if Austin, TX, officeholder living expense
				Stripe fee incurred on donations
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt	Office held
	experialiture to benefit C/Oi	1		
	Date	Payee name		
	10/27/2020	Stripe		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$29.89	N/A		
		Austin, TX 78758		
	PURPOSE OF	, ,	b) 	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees		Check if Austin, TX, officeholder living expense
				Stripe fee incurred on donations
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/OI	1		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 27/33 Rpt: 66/72	Your Minute is Up	00090507
4	Date	5 Payee name	
	10/28/2020	Stripe	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$12.47	N/A	
		Austin, TX 78758	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	1 000	outside of Texas. Complete Schedule T. , TX, officeholder living expense
			urred on donations
		C. 100 110	arroa orradinatione
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
	Date	Payee name	
	10/29/2020	Stripe	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$43.32	N/A	
		Austin, TX 78758	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	1 003	outside of Texas. Complete Schedule T. , TX, officeholder living expense
			urred on donations
		Surpe lee me	arrea or acriations
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field
⊨	Data		
	Date	Payee name	
	10/30/2020	Stripe	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$19.05	N/A	
		Austin, TX 78758	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 003	outside of Texas. Complete Schedule T.
	LXI LINDITORL		, TX, officeholder living expense
		Stripe fee inc	urred on donations
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	Complete ONLY if direct expenditure to benefit C/Ol	•	Office field
\vdash			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Reimbursement
Rental Expense
Transportation Equipment & Related Expense
Travel out of District
Ontract Labor

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

	Credit Card Payment	The Instruction Guide explains how to com	nple	ete this form.
1	Total pages Schedule F1: Sch: 28/33 Rpt: 67/72	2 FILER NAME Your Minute is Up		3 Filer ID (Ethics Commission Filers) 00090507
4	Date 11/02/2020	5 Payee name Stripe		
6	Amount (\$) \$7.84	7 Payee address; City; State; Zip Cod N/A Austin, TX 78758	le	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stripe fee incurred on donations
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held
	Date 11/03/2020	Payee name Stripe		
	Amount (\$) \$24.32	Payee address; City; State; Zip Cod N/A Austin, TX 78758	le	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stripe fee incurred on donations
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held
	Date 11/04/2020	Payee name Stripe		
	Amount (\$) \$29.36	Payee address; City; State; Zip Cod N/A	le	
		Austin, TX 78758		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stripe fee incurred on donations
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to com	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 29/33 Rpt: 68/72	Your Minute is Up		00090507
4	Date	5 Payee name		
	11/16/2020	Stripe		
6	Amount (\$) \$5.58	7 Payee address; City; State; Zip Cod N/A Austin, TX 78758	е	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stripe fee incurred on donations
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held
	Date	Payee name		
	11/24/2020	Stripe		
	Amount (\$) \$5.58	Payee address; City; State; Zip Cod N/A	е	
		Austin, TX 78758		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stripe fee incurred on donations
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held
	Date	Payee name		
	12/01/2020	Stripe		
	Amount (\$) \$5.58	Payee address; City; State; Zip Cod N/A	е	
		Austin, TX 78758		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stripe fee incurred on donations
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete th	nis form.
1	Total pages Schedule F1: Sch: 30/33 Rpt: 69/72	2 FILER NAME Your Minute is Up	3 Filer ID (Ethics Commission Filers) 00090507
4	Date 12/07/2020	5 Payee name Stripe	33333001
6	Amount (\$) \$2.95	7 Payee address; City; State; Zip Code N/A Austin, TX 78758	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Des	Scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ipe fee incurred on donations
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 12/08/2020	Payee name Stripe	
	Amount (\$) \$10.16	Payee address; City; State; Zip Code N/A	
		Austin, TX 78758	
	PURPOSE OF EXPENDITURE		scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ipe fee incurred on donations
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 12/09/2020	Payee name Stripe	
	Amount (\$) \$11.21	Payee address; City; State; Zip Code N/A	
		Austin, TX 78758	
	PURPOSE OF EXPENDITURE		scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ipe fee incurred on donations
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to cor	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 31/33 Rpt: 70/72	Your Minute is Up		00090507
4	Date	5 Payee name		
	12/24/2020	Stripe		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$1.63	N/A		
		Austin, TX 78758		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE			Check if Austin, TX, officeholder living expense
				Stripe fee incurred on donations
_	0 1: 0.11.7.7.1.			0.5
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou d	ght	Office held
	Date	Payee name		
	12/30/2020	Stripe		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$6.42	N/A		
		Austin, TX 78758		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Stripe fee incurred on donations
				Carpo roo mourrou on dondarono
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI	•		
	Date	Payee name		
	12/10/2020	Taco Cabana		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$131.37	9605 Research Blvd	uc	
	Ψ101.07	3000 Research Biva		
		Austin, TX 78759		
	BUBBOOF		/I- \	
	PURPOSE OF	, , ,	(a)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense
				food provided for volunteers
	Complete ONLY if direct	Candidate/Officeholder name Office sout	ght	Office held
	expenditure to benefit C/OI	1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to com	ple	ete this form.			
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
	Sch: 32/33 Rpt: 71/72	Your Minute is Up		00090507			
4	Date	5 Payee name		-			
	11/03/2020	Tucker, Terrance					
6	Amount (\$)	7 Payee address; City; State; Zip Cod	le				
	\$60.00	1002 Disraeli Circle					
		Pflugerville, TX 78660					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.			
	LAPENDITORE			Check if Austin, TX, officeholder living expense			
				contracted work			
_	Complete ONLY if direct	Condidate/Officeholder name	la t	Office hold			
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	nt	Office held			
	Date	Payee name					
	10/12/2020	Vaqueros					
	Amount (\$)	Payee address; City; State; Zip Cod	le				
	\$124.43	1801 S Capital of Texas Hwy					
		Austin, TX 78746					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
				food provided for volunteers			
				promise for total needs			
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held			
	expenditure to benefit C/O						
	Date	Payee name					
	12/20/2020	Victory Promotions					
	Amount (\$)	Payee address; City; State; Zip Cod	ما				
	\$1,015.18	114 Parker Street	ic				
	Ψ1,010.10	114 Falker Guest					
		Watertown , NY 13601					
		i	,, <u>,</u>				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) PPE	(a)	Description Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	PPE		Check if travel outside of Lexas. Complete Schedule 1. Check if Austin, TX, officeholder living expense			
				online order of facemasks			
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held			
	expenditure to benefit C/O	1					
_							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Comi	mittee	Gift/Awards/Memoria Legal Services The Instruction	als Expense		ense ges/Contract Labor		Travel Out of Dis OTHER (enter a	
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 33/33 Rpt: 72/72	\	Your Minute	is Up					00090507	
4	Date	5 F	Payee name							
	10/12/2020	۱ ۱	Walmart							
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Cod	е			
	\$65.11	2	2525 W And	erson Ln						
		/	Austin, TX 7	8757						
8	PURPOSE	(a) (Category (Se	e Categories listed a	t the top of this sche	edule) (b) Description			
	OF EXPENDITURE		Solicitation/I	undraising E	xpense		ш			plete Schedule T.
							campaign s		officeholder living	g expense
							campaign 30	аррі	103	
9	Complete ONLY if direct		andidate/Offic	ceholder name		Office soug	ht		Office h	5 4
	expenditure to benefit C/O	Н				ee eeug			000	3.0