

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090571		2 Total pages filed: 11	
3 COMMITTEE NAME Restore Leadership ATX				OFFICE USE ONLY	
				Date Received ELECTRONICALLY FILED 07/15/2021	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 6836 Austin Center Blvd Ste. 280 Austin, TX 78731				
	Date Hand-delivered or Date Postmarked				
	Receipt #		Amount		
	Date Processed				
	Date Imaged				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ellen				
	NICKNAME LAST SUFFIX Wood				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 6836 Austin Center Blvd Ste. 280 Austin, TX 78731				
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE TX				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 450-6550				
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff				
10 PERIOD COVERED	Month Day Year Month Day Year 04/22/2021 THROUGH 06/30/2021				
11 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Restore Leadership ATX		13 Filer ID (Ethics Commission Filers) 00090571	
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed Ballot ID:Prop F Election Date:2021-05-01 Desc:Proposition F - Adopt a Mayor-Council Model	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
	15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	40,720.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	57,894.60
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	17,616.18
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

16 AFFIDAVIT

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

Ellen Wood

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 11

17 COMMITTEE NAME Restore Leadership ATX		18 Filer ID (Ethics Commission Filers) 00090571
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 40,720.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 57,894.60
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/11
2 FILER NAME Restore Leadership ATX		3 Filer ID (Ethics Commission Filers) 00090571
4 Date 04/26/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Budet, Tony 6 Contributor address; City; State; Zip Code 3305 Steck Ave Austin, TX 78757	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) UFCU
Date 04/26/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Gary Contributor address; City; State; Zip Code 3148 Above Stratford Pl. Austin, TX 78746	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Heritage Title
Date 04/26/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Mark Contributor address; City; State; Zip Code 98 San Jacinto Blvd. Unit FRS 2501 Austin, TX 78701	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/26/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Richard Contributor address; City; State; Zip Code 2303 Windsor Rd. Austin, TX 78703	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) HPI
Date 04/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hootman, Joe Contributor address; City; State; Zip Code 11919 Meadowfire Dr. Austin, TX 78758	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DBA		Employer (See Instructions) UT Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/11
2 FILER NAME Restore Leadership ATX		3 Filer ID (Ethics Commission Filers) 00090571
4 Date 04/26/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kadison, Bret 6 Contributor address; City; State; Zip Code 1504 Brackenridge Str. Austin, TX 78704	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Chairman		9 Employer (See Instructions) Brazos Resources
Date 04/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matula, Cindy Contributor address; City; State; Zip Code 4917 Westview Dr. Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Alan Contributor address; City; State; Zip Code 2420 Harris Blvd. Austin, TX 78703	Amount of Contribution (\$) \$7,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/26/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swisher, Richard Contributor address; City; State; Zip Code 3601 Robbins Rd. Austin, TX 78730	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/26/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Cumby Group Contributor address; City; State; Zip Code 9229 Wateford Centre Blvd. Bldg. C, Suite 100 Austin, TX 78758	Amount of Contribution (\$) \$15,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/11
2 FILER NAME Restore Leadership ATX		3 Filer ID (Ethics Commission Filers) 00090571
4 Date 04/22/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Melba <hr/> 6 Contributor address; City; State; Zip Code P.O. Box 5623 Austin, TX 78763	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) self		9 Employer (See Instructions) Clarite

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 7/11	2 FILER NAME Restore Leadership ATX	3 Filer ID (Ethics Commission Filers) 00090571
4 Date 06/30/2021	5 Payee name American Bank	
6 Amount (\$) \$5.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 6469 Corpus Christi, TX 78466	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/26/2021	Payee name Anedot	
Amount (\$) \$645.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydas Str. Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/27/2021	Payee name Anedot	
Amount (\$) \$280.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydas Str. Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/5 Rpt: 8/11	2 FILER NAME Restore Leadership ATX	3 Filer ID (Ethics Commission Filers) 00090571
4 Date 04/29/2021	5 Payee name Anedot	
6 Amount (\$) \$4.30 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1340 Poydas Str. Suite 1770 New Orleans, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation processing fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/30/2021	Payee name Anedot	
Amount (\$) \$1.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydas Str. Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/26/2021	Payee name Aro Group, LLC	
Amount (\$) \$12,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2509 Lazy Oaks Dr. Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign management
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/5 Rpt: 9/11	2 FILER NAME Restore Leadership ATX	3 Filer ID (Ethics Commission Filers) 00090571
4 Date 04/26/2021	5 Payee name Aro Group, LLC	
6 Amount (\$) \$19,311.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2509 Lazy Oaks Dr. Austin, TX 78745	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/28/2021	Payee name Aro Group, LLC	
Amount (\$) \$7,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2509 Lazy Oaks Dr. Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign mangement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/30/2021	Payee name Cajas Digital	
Amount (\$) \$778.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 809 E. 6th Str. Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/5 Rpt: 10/11	2 FILER NAME Restore Leadership ATX	3 Filer ID (Ethics Commission Filers) 00090571
4 Date 04/30/2021	5 Payee name Cajas Digital	
6 Amount (\$) \$1,479.56 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 809 E. 6th Str. Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email campaign
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/26/2021	Candidate/Officeholder name Facebook	
Amount (\$) \$1,275.12 <input type="checkbox"/> Expenditure from corporate funds	Office sought 1 Hacker Way Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/26/2021	Candidate/Officeholder name Freach Design	
Amount (\$) \$9,800.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 1401 Wilshire Blvd. Austin, TX 78722	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printed material designs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 11/11	2 FILER NAME Restore Leadership ATX	3 Filer ID (Ethics Commission Filers) 00090571
4 Date 04/29/2021	5 Payee name Premier Political Communications	
6 Amount (\$) \$4,313.23 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4805 Woodview Ave. Austin, TX 78756	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held