CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT**

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

			1 Filer ID		2 Total pages filed:		
The C/OH Instruction	Guide explains how to c	omplete this form.				8	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Natasha		MI	Date Received	USE ONLY C RECEIVED AT	
	NICKNAME	LAST Harper-Madis	son	SUFFIX		114'20 pm1:34	
4 CANDIDATE /	ADDRESS / PO BOX;	APT / SUITE #; CI	TY;	ZIP CODE	Date Hand-delivered o	or Date Postmarked	
OFFICEHOLDER MAILING ADDRESS	PO Box 11678				Receipt #	Amount	
X Change of Address	Austin, TX 78711				Date Processed		
					Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	Marius		MI			
-	NICKNAME	LAST		SUFFIX			
Į.		Hobbs			CT	ATE: ZID CODE	
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (N	NO PO BOX PLEASE)	- Bld	Suite#; CITY;	Austin	TX 78752	
(Residence or Business) 7 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION				
TREASURER PHONE							
8 REPORT TYPE	X January 15 July 15	30th day befor		Runoff [Exceeded \$500 limit [15th day after cappointment (of Final Report (A		
9 PERIOD COVERED	Month Day 07/01/2019	Year	THROUGH	Month Day 12/31/20			
10 ELECTION	ELECTION DAY	Year	Primary General	ELECTION TYPE Runoff Special	Other		
11 OFFICE	OFFICE HELD (if any) City Council Place		vis	12 OFFICE SOUGH	T (if known)		
	•	GC) TO PAGE 2			ersion V1 1 3a6aat7	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

				2 of 8							
13 C / OH NAME	Harper-Madison, Nat	asha	14 Filer ID								
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder. These expenditures may have been made without the candidate's or consent. Candidates and officeholders are required to report this information only if they receive the second seco										
Additional Pages	COMMITTEE TYPE GENERAL	COMMITTEE NAME									
,	SPECIFIC	SPECIFIC COMMITTEE ADDRESS									
		COMMITTEE CAMPAIGN TREASURER NAME									
-		COMMITTEE CAMPAIGN TREASURER ADDRES	ss								
16 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (OTHER ARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$ 0.00							
	2. TOTAL POLITIC (OTHER THAN F	5)	\$ 0.00								
EXPENDITURE TOTALS	3. TOTAL POLITICA	ITEMIZED	\$ 44.16								
	4. TOTAL POLITIC		\$ 8,389.17								
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 247.86							
OUTSTANDING LOAN TOTALS		6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD									
17 AFFADAVIT	JOHN WALKER Notary Public, State of T Comm. Expires 05-03-2 Notary ID 13200168	1023 9 Mafar		e reported by me							
AFFIX NO	TARY STAMP / SEAL ABO	DVE	. 4	/.							
Sworn to and subso	cribed before me, by the sa	aid Natoska Harper - Wadson writing which, witness my hand and seal of office.	, this the	dayday							
Signature of office	2 Der administering	Soluc Walker Printed name of officer administering	Title of officer a	dministering oath							

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			3 of 8							
18 FILER NAME Harper-Madison, Na		19 Filer ID								
20 SCHEDULE SUBTOTA NAME OF SCHEDULE			SUBTOTAL AMOUNT							
1. SCHEDUL	1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS									
2. SCHEDUL	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS									
3. SCHEDUL	SCHEDULE B: PLEDGED CONTRIBUTIONS									
4. X SCHEDUL	LE E: LOANS		\$ 5,807.01							
5. X SCHEDUL	E F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 8,389.17							
6. SCHEDUL	E F2: UNPAID INCURRED OBLIGATIONS		\$							
7. SCHEDUL	E F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$							
8. SCHEDUL	.E F4: EXPENDITURES MADE BY CREDIT CARD		\$							
9. SCHEDUL	E G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$							
10. SCHEDUL	E H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$							
11. SCHEDUL	E I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$							
12. SCHEDUL TO FILER	E K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F	RETURNED	\$							
	<i>y</i>									

LOANS			SCHEDULE E			
The Instruction	on Guide explains how to complete this form.	1	1 Total pages Schedule E: Sch: 1/1 Rpt: 4/8			
FILER NAME Harper-Madison	, Natasha	3 Filer ID				
TOTAL OF UN	IITEMIZED LOANS	I	\$			
Date of loan 07/16/2019	7 Name of lender out-of-state PAC (ID#:)	9 Loan Amount (\$) \$5,807.0			
Is lender a financial institution?	8 Lender address; City; State; Zip Code PO Box 11678		10 Interest Rate			
No	Austin, TX 78711		11 Maturity Date			
Principal occupation	on / Job title (See Instructions) 13 Employer (See Instructions) City of Austin	tructions)				
Description of Colle	ateral 15 Check if personal i	unds were deposited	d into political account (See Instructions)			
GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)			
X not applicable	18 Guarantor address; City; State; Zip Code					
Principal occupation	on 21 Employer (See Ins	tructions)				
	I					
rms provided by T	exas Ethics Commission www.ethics.state.tx.us		Version V1.1.3a6aai			

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					Travel in District Travel Out of District OTHER (enter a category not listed above)		
ㄴ				plains now to co	mpie	ete this form.	_			
1	Total pages Schedule F1: Sch: 1/4 Rpt: 5/8	1	E dison, Natasha				3	Filer ID		
Ŀ							L			
4	Date 07/23/2019	5 Payee name Barnes, Ro								
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode					
	\$350.00	710 Vangu	ard Street							
		Lakeway, ⁻	TX 78734							
8	PURPOSE	(a) Category (s	See Categories listed at the top of	this schedule)	(b)	Description				
	OF EXPENDITURE							ide of Texas. Complete Schedule T.		
						Refund Conti		, officeholder living expense		
						Relatia Conti	ibu	idon		
Ļ			·	o#	Ļ			25.		
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ight			Office held		
Г	Date	Payee name	9							
	07/23/2019	Galindo, C	id							
Г	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de					
	\$350.00	411 Brazos	s St							
		Ste 99								
		Austin, TX	78701							
⊢	DUDDOCE	2 3			(L-)					
	PURPOSE OF	(a) Category (s	See Categories listed at the top of	this schedule)	(a)	Description	nutei	ide of Texas. Complete Schedule T.		
	EXPENDITURE							, officeholder living expense		
						Refund Conti	ribu	ition		
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ght			Office held		
⊨	Date	Davos name	`							
	07/31/2019	Payee name Hartnett, L								
L				C+-+-: 7:- C-	-I-					
	Amount (\$)	Payee addre		State; Zip Co	ae					
	\$5,195.01	2903 E 12t	n Street							
		Austin, TX	78702							
	PURPOSE	(a) Category (s	See Categories listed at the top of	this schedule)	(b)	Description				
	OF EXPENDITURE	Office Ove	rhead/Rental Expense					de of Texas. Complete Schedule T.		
	EXI ENDITORE							officeholder living expense		
						Campaign Di	rec	tor Fee		
	Complete ONLY if direct expenditure to benefit C/OH		ficeholder name	Office sou	ght			Office held		
\vdash							_			
L										

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 2/4 Rpt: 6/8	Harper-Madison, Natasha
4	Date	5 Payee name
	07/31/2019	Hobbs, Marcus
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$350.00	8810 N Lamar Blvd
		Austin, TX 78753
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Refund Contribution
		A Columb Columbia
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	07/31/2019	Miller, Paul
	Amount (\$)	Payee address; City; State; Zip Code
	\$350.00	4602 Adelphi Lane
		Austin, TX 78727
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Refund Contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/23/2019	Moore, Margaret
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	4613 Camacho Street
		Austin TV 79722
	DUDDOS-	Austin, TX 78723
	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	Check if Austin, TX, officeholder living expense
		Refund Contribution
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	,	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Relat

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			mmittee	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Polling Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.			Travel in District Travel Out of District OTHER (enter a category not listed above)				
-	Total pages Cabadula F1:	12	EU ED NAME		explains ii		Jilipi		_	Eiler ID	
1	Total pages Schedule F1:	2							3	Filer ID	
L	Sch: 3/4 Rpt: 7/8		нагрег-мас	dison, Natasha							
4	Date	5	Payee name								
1	07/31/2019		Ngin, Kalia	ne							
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Co	ode				
	\$350.00		4602 Adelp	hi Lane							
			Austin, TX	78727							
8	PURPOSE	(a)	Category (S	ee Categories listed at the top	of this schee	dule)	(b)	Description			
l	OF EXPENDITURE							_		de of Texas. Complete Schedule T	
	LXI LINDITORL							ш.		officeholder living expense	
l								Refund Contr	ribu	tion	
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9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	iceholder name	Of	ffice sou	ught			Office held	
	Date		Payee name	0							
	07/23/2019		Penn, Jess	e							
Г	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	ode				
	\$350.00		10924 Pilgr		•						
				9:							
			Austin TV	70754							
L			Austin, TX	78754			_				
	PURPOSE	(a)	Category (Se	ee Categories listed at the top	of this sched	dule)	(b)	Description			
	EXPENDITURE									de of Texas. Complete Schedule T	
								Refund Contr		officeholder living expense	
								rtelana Conti	ibu	uon	
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	Complete ONLY if direct expenditure to benefit C/Ol		Zandidate/Om	iceholder name	Of	ffice sou	ıgnt			Office held	
	Date		Payee name								
	07/23/2019		Shands, Ro	b							
Г	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode				
	\$250.00		1715 W 30t								
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ı			Austin, TX 7	70702							
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	PURPOSE OF	(a)	Category (Se	ee Categories listed at the top	of this sched	dule)	(b)	Description			
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_	Complete ONLY if direct	_	andidet-10th	anhaldar no			. mlc t			Office held	
	Complete ONLY if direct expenditure to benefit C/OH		andidate/Offi	ceholder name	Of	fice sou	ignt			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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wagnes/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			mmittee	Gift/Awards/Mem Legal Services The Instruction	orials Expense on Guide explains	Salaries		/Contract Labor	Travel Out of OTHER (ente	District er a category not listed above	e)
1	Total pages Schedule F1:	2	FILER NAME						3 Filer ID		
L	Sch: 4/4 Rpt: 8/8		Harper-Mad		ha						
4	Date	5	Payee name								
	07/23/2019		Soeur, Char	nny							
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip C	Code				
	\$350.00		7908 Camer	ron Road							
			Austin, TX 7	8754							
8	PURPOSE	(a)	Category (Se	e Categories liste	ed at the top of this scl	nedule)	(b)	Description			
	OF EXPENDITURE								outside of Texas. C , TX, officeholder liv	omplete Schedule T.	
								Refund Conti		and expense	
9	Complete ONLY if direct		Candidate/Offic	ceholder nam	e	Office so	ought		Office	held	
	expenditure to benefit C/O						3				
F	Date		Payee name							*:	
	07/23/2019		Soeur, Laur	a							
Г	Amount (\$)		Payee addres	ss; City;	State	; Zip C	Code				
	\$350.00		7908 Camer								
			Austin, TX 7	8754							
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