

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

| | | | | | |
|---|---|--|--|--|--|
| The C/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00090114 | | 2 Total pages filed: 3 | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR FIRST MI Ann | | OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/16/2020 | | |
| | NICKNAME LAST SUFFIX Kitchen | | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 2401 Briargrove Austin, TX 78704 | | | Date Hand-delivered or Date Postmarked | |
| | | | | Receipt # Amount | |
| | | | | Date Processed | |
| | | | | Date Imaged | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI Mary Ann | | | | |
| | NICKNAME LAST SUFFIX Neely | | | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1908 Barton Parkway Austin, TX 78704 | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (512) 442-3414 | | | | |
| 8 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR) | | | | |
| 9 PERIOD COVERED | Month Day Year THROUGH Month Day Year 01/01/2020 06/30/2020 | | | | |
| 10 ELECTION | ELECTION DATE Month Day Year 11/06/2018 | | ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special | | |
| | | | | | |
| 11 OFFICE | OFFICE HELD (if any) Council Member, District 5 District District 5 Travis | | 12 OFFICE SOUGHT (if known) Council Member, District 5 | | |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 3

| | | | |
|-----------------------|--------------|--------------------|--|
| 13 C / OH NAME | Kitchen, Ann | 14 Filer ID | (Ethics Commission Filers) 00090114 |
|-----------------------|--------------|--------------------|--|

| | | |
|---|--|---|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | |
| | COMMITTEE TYPE | COMMITTEE NAME |
| | <input type="checkbox"/> GENERAL | COMMITTEE ADDRESS |
| | <input type="checkbox"/> SPECIFIC | COMMITTEE CAMPAIGN TREASURER NAME |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS |

| | | | |
|--------------------------------|---|----|-----------|
| 16 CONTRIBUTION TOTALS | 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ | 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 0.00 |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 0.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 16,054.84 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 38,478.38 |

| | | |
|--|---------------------------------------|-------------------------------------|
| 17 AFFADAVIT | | |
| I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. | | |
| Ann Kitchen | | |
| Signature of Candidate or Officeholder | | |
| AFFIX NOTARY STAMP / SEAL ABOVE | | |
| Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office. | | |
| Signature of officer administering | Printed name of officer administering | Title of officer administering oath |

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

3 of 3

| | | |
|--|---|---|
| 18 FILER NAME Kitchen, Ann | | 19 Filer ID (Ethics Commission Filers) 00090114 |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ |
| 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 E: LOANS | \$ |
| 5. | <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |