

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) 00090482		2 Total pages filed: 13	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Louis C.		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/26/2020		
	NICKNAME LAST SUFFIX Herrin III				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 1023 WISTERIA TRL Austin, TX 78753-5849		Date Hand-delivered or Date Postmarked		
			Receipt #		Amount
			Date Processed		
			Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Louis				
	NICKNAME LAST SUFFIX Herrin III				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1023 WISTERIA TRL Austin, TX 78753-5849				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 567-9489				
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 type="checkbox"/> July 15 <input checked="" 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 09/28/2020 10/24/2020				
10 ELECTION	ELECTION DATE Month Day Year 11/03/2020		ELECTION TYPE		
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Herrin III, Louis C.	14 Filer ID (Ethics Commission Filers) 00090482
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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 checked="" type="checkbox"/> GENERAL	Fight for Austin
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		807 Brazos St., Ste. 408,
		Austin, TX 78701
	COMMITTEE CAMPAIGN TREASURER NAME	
	Cheney, Logan	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	
	TX	

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)	\$	3,765.76
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	11,707.17
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	6,842.28
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFADAVIT

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

Louis C. Herrin III

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

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18 FILER NAME Herrin III, Louis C.		19 Filer ID (Ethics Commission Filers) 00090482
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,765.76
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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 11,680.93
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 26.24
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/6 Rpt: 4/13
2 FILER NAME Herrin III, Louis C.		3 Filer ID (Ethics Commission Filers) 00090482
4 Date 10/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALCORTA, JOSE <hr/> 6 Contributor address; City; State; Zip Code 1710 Bauerle Avenue Austin, TX 78704	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Mechanical Engineer		9 Employer (See Instructions) Function Eng.
Date 10/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Monica <hr/> Contributor address; City; State; Zip Code 6012 Oakclaire Drive Austin, TX 78735	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) photographer		Employer (See Instructions) self
Date 10/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Christina <hr/> Contributor address; City; State; Zip Code 2715 Mountain Laurel Lane Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Dyslexia Therapist		Employer (See Instructions) Self
Date 10/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Todd <hr/> Contributor address; City; State; Zip Code 3801 North Capital of Texas Highway E240-210 Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Film Industry		Employer (See Instructions) Self
Date 10/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bair, Dave <hr/> Contributor address; City; State; Zip Code 1408 Thaddeus Cove Austin, TX 78746	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/6 Rpt: 5/13
2 FILER NAME Herrin III, Louis C.		3 Filer ID (Ethics Commission Filers) 00090482
4 Date 10/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borgfeld, Sheryl <hr/> 6 Contributor address; City; State; Zip Code 1906 Greenbrook Parkway Austin, TX 78723	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) OT		9 Employer (See Instructions) Elgin isd
Date 10/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Phillip <hr/> Contributor address; City; State; Zip Code 7801 Lenape Trl Austin, TX 78736	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions) Vince Young Steakhouse
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, josephH Howell <hr/> Contributor address; City; State; Zip Code 2113 Zach Scott Street AUSTIN, TX 78723	Amount of Contribution (\$) \$17.76
Principal occupation / Job title (See Instructions) Senior Project Manager		Employer (See Instructions) Jones Lang LaSalle
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caradonio, Thomas <hr/> Contributor address; City; State; Zip Code 4616 Saloma Place Austin, TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Operations Consultant		Employer (See Instructions) Self-Employed
Date 09/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grigassy, Christina <hr/> Contributor address; City; State; Zip Code 2304 Riverside Farms Road Apt A Austin, TX 78741	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/6 Rpt: 6/13
2 FILER NAME Herrin III, Louis C.		3 Filer ID (Ethics Commission Filers) 00090482
4 Date 09/30/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Douglas <hr/> 6 Contributor address; City; State; Zip Code 3345 Bee Cave Road Suite 205 Austin, TX 78746	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Unknown		9 Employer (See Instructions) Unknown
Date 09/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Julie Ann <hr/> Contributor address; City; State; Zip Code 3345 Bee Cave Road Suite 205 Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houser, Robert <hr/> Contributor address; City; State; Zip Code 3801 Hunterwood Pt Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Charles Maund Volkswagen
Date 10/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keith, Victoria <hr/> Contributor address; City; State; Zip Code 416 Ridgewood Road West Lake Hills, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) attorney recruiter		Employer (See Instructions) Beacon Hill Staffing
Date 10/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koopman, Jenni <hr/> Contributor address; City; State; Zip Code 7304 Eastcrest dr Austin, TX 78752	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) Home Health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/6 Rpt: 7/13
2 FILER NAME Herrin III, Louis C.		3 Filer ID (Ethics Commission Filers) 00090482
4 Date 10/14/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kozuh, Joseph <hr/> 6 Contributor address; City; State; Zip Code 3839 Dry Creek Drive, Condo 136 Condo 136 Austin, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehman, Jeanine <hr/> Contributor address; City; State; Zip Code 6702 Fireoak Drive Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Jeanine Lehman PC
Date 10/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehman, Jeanine <hr/> Contributor address; City; State; Zip Code 6702 Fireoak Drive Austin, TX 78759	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Jeanine Lehman PC
Date 10/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Vicki <hr/> Contributor address; City; State; Zip Code 1401 Kamar Drive Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Hotel Managment		Employer (See Instructions) Wyndham Garden Hotel
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowry, Price <hr/> Contributor address; City; State; Zip Code 1904 West 40th Street Austin, TX 78731	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Oil and Gas		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/6 Rpt: 8/13
2 FILER NAME Herrin III, Louis C.		3 Filer ID (Ethics Commission Filers) 00090482
4 Date 09/30/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naish, Annette <hr/> 6 Contributor address; City; State; Zip Code 9616 Covey Ridge Lane Austin, TX 78758	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Unknown		9 Employer (See Instructions) Unknown
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogden, Susan <hr/> Contributor address; City; State; Zip Code 2302 W 10th St Austin, TX 78703-3845	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Landlord		Employer (See Instructions) Self
Date 10/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Michael <hr/> Contributor address; City; State; Zip Code 10605 Cooper Hill Dr Austin, TX 78758	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software engineer		Employer (See Instructions) Aceable
Date 10/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheinberg, Joseph <hr/> Contributor address; City; State; Zip Code 805 Christopher Street Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Joseph Scheinberg
Date 10/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slaughter, Louisa <hr/> Contributor address; City; State; Zip Code 501 West Avenue 2903 Austin, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/6 Rpt: 9/13
2 FILER NAME Herrin III, Louis C.		3 Filer ID (Ethics Commission Filers) 00090482
4 Date 10/05/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Szalay, Barbara <hr/> 6 Contributor address; City; State; Zip Code 1322 Thaddeus Cove Austin, TX 78746	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Landuyt, Dean <hr/> Contributor address; City; State; Zip Code 502 Sunny Lane Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) edgar, carleen <hr/> Contributor address; City; State; Zip Code 3901, Duval Street Austin, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) programmer		Employer (See Instructions) qsi
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hardeman, rebecca <hr/> Contributor address; City; State; Zip Code 6757 airport blvd 6757 airport blvd austin, TX 78752	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions) self
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) shepherd, Eugene <hr/> Contributor address; City; State; Zip Code 1101 belmont parkway austin, TX 78703	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) partner		Employer (See Instructions) atx energy partners

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: 1/3 Rpt: 10/13	2 FILER NAME Herrin III, Louis C.	3 Filer ID (Ethics Commission Filers) 00090482
4 Date 10/24/2020	5 Payee name Anedot	
6 Amount (\$) \$124.91	7 Payee address; City; State; Zip Code 1340 Poydrass Street 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 Fees for Handling donations
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2020	Payee name Austin Sign Company	
Amount (\$) \$623.52	Payee address; City; State; Zip Code 9012 Research Blvd Suite C-9 Austin, TX 78757	
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 24 4x4 signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/22/2020	Payee name Pacesetter	
Amount (\$) \$566.24	Payee address; City; State; Zip Code P. O. Box 2146 Houston, TX 77252-2146	
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 handing out door hangers
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: 2/3 Rpt: 11/13	2 FILER NAME Herrin III, Louis C.	3 Filer ID (Ethics Commission Filers) 00090482
4 Date 10/07/2020	5 Payee name Perez, Jennifer	
6 Amount (\$) \$2,160.00	7 Payee address; City; State; Zip Code 13401 Legendary Drive apt 11106 Austin, TX 78727	
8 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 Social Media Marketing Consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/16/2020	Payee name Perez, Jennifer	
Amount (\$) \$275.00	Payee address; City; State; Zip Code 13401 Legendary Drive apt 11106 Austin, TX 78727	
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 sign designs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/21/2020	Payee name PinPoint Action, LLC	
Amount (\$) \$1,950.03	Payee address; City; State; Zip Code 280 Wekiva Springs Road Longwood, FL 33279	
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 Sending out text messages
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: 3/3 Rpt: 12/13	2 FILER NAME Herrin III, Louis C.	3 Filer ID (Ethics Commission Filers) 00090482
4 Date 10/08/2020	5 Payee name Quik Print	
6 Amount (\$) \$1,787.85	7 Payee address; City; State; Zip Code 8508 Cross Park Drive Austin, TX 78754	
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 1000 door hangers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/16/2020	Payee name Thomas Graphics	
Amount (\$) \$4,193.38	Payee address; City; State; Zip Code PO BOX 14226 Austin, TX 78714-2226	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 printing flyer and mailing them
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 1/1 Rpt: 13/13	2 FILER NAME Herrin III, Louis C.	3 Filer ID (Ethics Commission Filers) 00090482
4 Date 10/01/2020	5 Payee name DSL Extreme	
6 Amount (\$) \$26.24 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code Lockbox #912593 Pasadena, CA 91110	
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 Paying for web site
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held