AMENDMENT: APPOINTMENT OF A CAMPAIGN TREASURER BY A SPECIFIC-PURPOSE COMMITTEE

FORM ASTA PG 1

| - | 1 | | | | | |
|--|---|---|-----------------|--|--|---------------------------------|
| See ASTA Instruction Guide for detailed instructions. If you are involved in a School District Bond Election, you must file Form ASTA with the local filing authority BEFORE sending a file-stamped 4 | | | OFFICE USE ONLY | | | |
| | | Texas Ethics Commission. | | | Date Received | |
| 2 | COMMITTEE NAME | HAD ENOUGH, AUSTIN | ? | 3 FILERID# | | |
| 4 | COMMITTEE NAME | NEW | 2 2 3000000 | 7 | | |
| 6 | COMMITTEE | NEW ADDRESS / PO BOX; APT 6836 Austin Center Blvd, Bldg | 1, Ste 280, Aus | | Assembly the state of the state | C RECEIVED AT 17 '20 AMB: 48 |
| | | | | | Date Hand-delivered | or Postmarked |
| 6 | CAMPAIGN TREASURER | NEW MS/MRS/MR FIR | | MI | Receipt# | Amount \$ |
| | NAME | ME Ms Ellen NICKNAME LAST SUFFIX | | | | |
| | | Wood | | | Date Imaged | |
| 7 | CAMPAIGN TREASURER STREET ADDRESS (residence or business) | NEW STREET ADDRESS (NO PO B | | /SUITE#; CITY; STATE; | ZIP CODE | |
| | (residence of Edeliness) | | | | | |
| 8 | CAMPAIGN TREASURER MAILING ADDRESS | NEW ADDRESS / PO BOX; APT | 「/SUITE#, | спү; | STAT | E; ZIP CODE |
| - | same as above | | | | | 34 1 |
| 9 | CAMPAIGN TREASURER PHONE | 1 1 | ONE NUMBER | EXTENSION | | |
| 10 | PERSON APPOINTING TREASURER | FIRST Ellen Wood | MI | LAST | * | SUFFIX |
| 11 | SIGNATURE | I understand that I have to committee and that I am in fines for failure to do so contributions from corpora | esponsible for | or filing all required repo re of the restrictions in t | rts and that I m | ay be subject to |
| | | | | Signature | of Campaign Treasurer | |
| 12 | ASSISTANT CAMPAIGN TREASURER (see instructions) | NEW FIRST | MI | LAST | | SUFFIX |
| 13 | ASSISTANT CAMPAIGN TREASURER ADDRESS | NEW ADDRESS / PO BOX; AP | / SUITE#, | спу; | STAT | E: ZIP CODE |
| 14 | ASSISTANT CAMPAIGN TREASURER PHONE | NEW AREA CODE PH | ONE NUMBER | EXTENSION | | |
| | | . 1 77157 | GO TO PAG | GE 2 | 1 | |

AMENDMENT: SPECIFIC-PURPOSE COMMITTEE PURPOSE AND MODIFIED REPORTING DECLARATION

FORM ASTA

| 16 COMMITTEE NAM | ΛE . | 16 FILER ID# | | |
|---|---|---------------------------------|--|--|
| Had Enough, Austi | n? | | | |
| | | | | |
| 17 COMMITTEE PURPOSE | CANDIDATE / OFFICEHOLDER NAME Mackenzie Kelly | | | |
| X SUPPORT CANDIDATE OPPOSE CANDIDATE | OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) District 6 Council Seat | | | |
| ASSIST OFFICEHOLDER | | | | |
| NEW ADD | BALLOT IDENTIFICATION OF MEASURE / # | ELECTION DATE Month Day Year | | |
| OPPOSE MEASURE | DESCRIPTION | | | |
| 18 MODIFIED REPORTING DECLARATION | **This declaration must be filed no later than the 30th day before the first election to which the declaration applies. ** **The modified reporting declaration is valid for one election cycle only. ** (An election cycle includes a primary election, a general election, and any related runoffs.) The committee does not intend to accept more than \$900 in political contributions or make more than \$900 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. The committee understands that if either one of those limits is exceeded, the committee's campaign treasurer will be required to file pre-election reports and, if necessary, a runoff report. | | | |
| | Year of election(s) or election cycle to which declaration applies | Signature of Campaign Treasurer | | |

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

TEC Filers may send this form to the TEC electronically at treasappoint@ethics.state.tx.us

or mail to Texas Ethics Commission P.O. Box 12070 Austin, TX 78711-2070

Non-TEC Filers must file this form with the local filing authority DO NOT SEND TO TEC

For more information about where to file go to: https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php

This appointment is effective on the date it is filed with the appropriate filing authority.

AMENDMENT: SPECIFIC-PURPOSE COMMITTEE PURPOSE AND MODIFIED REPORTING DECLARATION

FORM ASTA PG 2

| 15 | COMMITTEE NA | NAT- | | | | |
|---|---|--|---|--|--|--|
| 10 | COMMITTEENA | ME | | 16 FILER ID# | | |
| | Had Enough Aust | in? | | | | |
| | | 1 | 4 | | | |
| 17 | COMMITTEE PURPOSE | CANDIDATE / OFFICEHOLDER NAME | | | | |
| - | | Jennifer Virden | | | | |
| IX. | NEW ADD | | | | | |
| X | SUPPORT CANDIDATE | OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) | | | | |
| | OPPOSE CANDIDATE | District 10 Council Seat | | | | |
| | ASSIST OFFICEHOLDER | | | | | |
| | > = = = = = = = = = = = = = = = = = = = | 1 1 | 10.19(6) | 1 00000000 | | |
| | NEW TADD | BALLOT IDENTIFICATION OF MEASURE / # | | ELECTION DATE | | |
| | NEW ADD | | Mo | nth Day Year | | |
| | SUPPORT MEASURE | | | | | |
| | SOFFORT MEASURE | DESCRIPTION | | | | |
| | OPPOSE MEASURE | | | * | | |
| | | | | * | | |
| 18 | MODIFIED | NEW | | | | |
| REPORTING COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSIN | | | | | | |
| DECLARATION MODIFIED REPORTING. | | | | | | |
| | | | | | | |
| | | ••This declaration mus | t be filed no later than th | e 30th day | | |
| | | before the first election to which the declaration applies. •• | | | | |
| | | | | | | |
| | | ••The modified reporting declar | estion is valid for any al- | | | |
| | | (An election cycle includes a prim | ary election, a general election, and a | ny related runoffs) | | |
| | | | | | | |
| | | The committee does not inten- | d to accept more than | 900 in political | | |
| | | contributions or make more that | an \$900 in political exper | ditures (exclud- | | |
| | | ing filing fees) in connection w | ith any future election wit | hin the election | | |
| | | cycle. The committee understa | ands that if either one of | those limits is | | |
| | | exceeded, the committee's can pre-election reports and, if nece | npaign treasurer will be | required to file | | |
| | | p. 3 cleation reports and, if field | a runon report. | * | | |
| | | | | | | |
| | | | Turning across | Service Control of the Control of th | | |
| | | Year of election(s) or election cycle to which declaration applies | Signature of Campai | gn Treasurer | | |
| | | V CO TO CONTRACTOR | A Constant Constant | | | |

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AMENDMENT: SPECIFIC-PURPOSE COMMITTEE:

FORM ASTA PG 3

STATEMENT AUTHORIZING DIRECT CAMPAIGN EXPENDITURES FROM CORPORATION OR LABOR ORGANIZATION POLITICAL CONTRIBUTIONS UNDER SECTION 252.0031, ELECTION CODE

| 19 COMMITTEE NAME | Had Enough Austin? | | | |
|--|--|--|--|--|
| 0 AFFIRMATION (If applicable) | I swear, or affirm, under p and correct: | enalty of perjury that | the following stater | nent is in all things true |
| (Check if applicable) an office labor orgon or an orgapointm | tical committee named and holder, and will not use anization to make a perficeholder, or (2) a political ent a Statement Authorizing the political Contributions of the committee of the contributions | e any political colitical colitical contribution al committee that hat g Direct Campaign | ontribution from to: (1) a candid as not included in | a corporation or a ate for elective office its campaign treasurer |
| Labor Org | tatement Authorizing I ganization Political Contrib paign treasurer appointmen | | | |
| | DI EACE COMPI | ETE CITUES OBTIC | N (4) OB (2) BELO | NAZ- |
| (1) Affidavit Ju | | LETE EITHER OPTIC | ON (1) OR (2) BELC | W. |
| (1) Affidavit Ju | rat: | | | |
| 3" | | | | |
| | | | · · · | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | 1 v a | Sign | nature of Committee | Representative |
| | | | | |
| Notary S | tamp/Seal | , | | |
| 1 2 2 2 2 2 | | | | |
| Sworn to and subscri | bed before me by | | , this the | day of |
| 20 to certify w | hich, witness my hand and s | seal of office. | *1 ** * 1 | |
| | | 3 | | |
| | The state of the s | | | The Vitte of W |
| Signature of officer admir | nistering oath Printed I | Name of officer administe | ering oath Tit | le of officer administering oath |
| | 5 A P 6 Y 199-1 | OR | | |
| | | | 4 2 4 4 4 | Annual Control of the |
| (2) Unsworn D | eclaration Jurat: | | | |
| Ellon | Mood | | 5 . I <u> </u> | |
| My name isEllen \ | vood | and my | date of birth is | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| 1 | | 2.00 E - 3.00 | | |
| My Address is 6836 | Austin Center Blvd, Bld 1, 2 | 80 Austin | TX 78 | 3731 USA |
| my / nau 1000 to | (street) | (city) | (state) (z | rip code) (country) |
| | | | | i x a fara a |
| | | , | | the state of the s |
| Executed in Travis | County, State of | Texas, on the | 16th day of Novem | ber , 20_20 |
| | | S | Eller Word | The grant of the second |
| | | Signature of C | Committee Represer | ntative (Declarant) |
| and an inches | | Oignature of C | Zonimico i tepicooi | |
| Filers may send this fo | orm to the TEC electronically | rat | | |
| | state.tx.us or by mail to: Tex | | Non-TEC Filers | must file this form |
| u casappoint (weurics. | state.tx.us of by Itlail to. Text | 40 | with the local fili | ng authority |

Ethics Commission, P.O. Box 12070, Austin, TX 78711-2070