

Report of Direct Campaign Expenditures:ATX.1 COVERSHEET

1 INDIVIDUAL OR ORGANIZATION NAME	TITLE; FIRST; MI	PAGE # 6	
	LAST; SUFFIX Had Enough Austin?	ACCOUNT # 00090519	
		OFFICE USE ONLY	
2 INDIVIDUAL OR ORGANIZATION ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 6836 Austin Center Blvd Bld 1 Ste 280	Date Received ELECTRONICALLY FILED 11/16/2020	
	Austin, TX 78731 <input type="checkbox"/> (CHECK IF FILER'S HOME ADDRESS)	Receipt #	
3 INDIVIDUAL FILER EMPLOYER & OCCUPATION	FILER OCCUPATION	FILER EMPLOYER	HD / PM
			Amount
4 COMMITTEE TREASURER NAME	TITLE; FIRST; MI; LAST; SUFFIX Ellen Wood	Date Processed	
		Date Imaged	
5 COMMITTEE TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 6836 Austin Center Blvd Bld 1 Ste 280 Austin, TX 78731		

Expenditure

FORM ATX1EXPEND

1 FILER NAME Had Enough Austin?		2 FILER ID 00090519	3 Total pages Schedule ATX8EXPEND: Sch: 1/2 Rpt: 2/6
4 PAYEE NAME	LAST FIRST MI Aro Group, LLC		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 2509 Lazy Oaks Drive Austin, TX 78745		
6 EXPENDITURE DETAILS	(a) Category Other	(b) Description Canvassing	
	(c) Date 11/16/2020	(d) Amount (\$) \$37,500.00	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Expenditure

FORM ATX1EXPEND

1 FILER NAME Had Enough Austin?		2 FILER ID 00090519	3 Total pages Schedule ATX8EXPEND: Sch: 2/2 Rpt: 3/6
4 PAYEE NAME	LAST FIRST MI Southside Printing		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 3005 S Lamar Blvd Austin, TX 78704		
6 EXPENDITURE DETAILS	(a) Category Printing Expense	(b) Description	
	(c) Date 11/16/2020	(d) Amount (\$) \$792.39	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Contribution

FORM **ATX1CONTRIB**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule ATX1: Sch: 1/2 Rpt: 4/6
2 FILER NAME Had Enough Austin?		3 Filer ID (Ethics Commission Filers) 00090519
4 Date 11/12/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Budet, Tony (Mr.) 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) Banker		9 Employer (See Instructions) UFCU
Date 11/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Bryan Contributor address; City; State; Zip Code 303 Colorado Street Ste 2300 Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) DuBois Bryant & Campbell, LLP.
Date 11/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cumby Development LLC Contributor address; City; State; Zip Code 9229 Waterford Center Blvd Austin, TX 78758	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Gary Contributor address; City; State; Zip Code 401 Congress Ave, Ste 1500 Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Heritage Title Company of Austin, Inc.
Date 11/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harte, Chris Contributor address; City; State; Zip Code 327 Congress Ave #200 Austin, TX 78701	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

Contribution

FORM **ATX1CONTRIB**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule ATX1: Sch: 2/2 Rpt: 5/6
2 FILER NAME Had Enough Austin?		3 Filer ID (Ethics Commission Filers) 00090519
4 Date 11/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Steve (Mr.) 6 Contributor address; City; State; Zip Code 405 W. 14th Street Austin, TX 78701	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) Executive Chairman		9 Employer (See Instructions) Capstar Partners
Date 11/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Mike 6 Contributor address; City; State; Zip Code Post Office Box 146 Austin, TX 78767	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Ellen (Ms.) 6 Contributor address; City; State; Zip Code 6836 Austin Center Boulevard 1-280 Austin, TX 78731	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) vcfo
Date 11/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yokubaitis, Jonah 6 Contributor address; City; State; Zip Code 1110 Old Walsh Tarlton Austin, TX 78746	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Manager and Investor

Report of Direct Campaign Expenditures:

ATX.1

AFFIDAVIT

This information serves as the electronic signature of the person legally responsible for filing this report.

I swear or affirm under penalty of perjury that each direct campaign expenditure was made without prior consent, cooperation, strategic communication, consultation, or sharing of material information regarding the communication's content, intended audience, timing, or method of dissemination between an affected candidate, the candidate's campaign staff, the candidate's campaign committee, or an agent or employee of the candidate or the committee, and the person making the expenditure, or that person's agent or employee.

I further swear or affirm under penalty of perjury that this Report of Direct Campaign Expenditures is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code Section 2-2-32.

Had Enough Austin?

Signature of Filer