

Report of Direct Campaign Expenditures:ATX.1 COVERSHEET

1 INDIVIDUAL OR ORGANIZATION NAME	TITLE; FIRST; MI	PAGE # 11		
	LAST; SUFFIX Had Enough Austin?	ACCOUNT # 00090519		
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 11/30/2020	
	Austin, TX 78731		Receipt #	
	<input type="checkbox"/> (CHECK IF FILER'S HOME ADDRESS)		HD / PM	Amount
	FILER OCCUPATION		Date Processed	
3 INDIVIDUAL FILER EMPLOYER & OCCUPATION	FILER EMPLOYER		Date Imaged	
4 COMMITTEE TREASURER NAME	TITLE; FIRST; MI; LAST; SUFFIX Ellen Wood			
	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: 1/6 Rpt: 2/11
4 PAYEE NAME	LAST FIRST MI Vera, Bobby		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 130 Niven Path Jarrell, TX 76537		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 11/29/2020	(d) Amount (\$) \$900.00	
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: 2/6 Rpt: 3/11
4 PAYEE NAME	LAST FIRST MI Grassroots Targeting		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 106 S Columbus Street Alexandria, VA 22314		
6 EXPENDITURE DETAILS	(a) Category Polling Expense	(b) Description	
	(c) Date 11/30/2020	(d) Amount (\$) \$3,000.00	
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: 3/6 Rpt: 4/11
4 PAYEE NAME	LAST FIRST MI Freach Design		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 1401 Wilshire Blvd. Austin, TX 78722		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 11/30/2020	(d) Amount (\$) \$9,600.00	
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: 4/6 Rpt: 5/11
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 PAC - Canvassing	
	(c) Date 11/30/2020	(d) Amount (\$) \$25,000.00	
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: 5/6 Rpt: 6/11
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 Consulting Expense	(b) Description	
	(c) Date 11/30/2020	(d) Amount (\$) \$6,250.00	
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: 6/6 Rpt: 7/11
4 PAYEE NAME	LAST FIRST MI Paragon Printing & Mailing		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 10423 Mc Kalla Pl, Austin Austin, TX 78758		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 11/30/2020	(d) Amount (\$) \$32,164.00	
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	

Contribution

FORM **ATX1CONTRIB**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule ATX1: Sch: 1/3 Rpt: 8/11
2 FILER NAME Had Enough Austin?		3 Filer ID (Ethics Commission Filers) 00090519
4 Date 11/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, J. Tim	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code 2201 Exposition Blvd Apt B Austin, TX 78703	
8 Principal occupation / Job title (See Instructions) Investor		9 Employer (See Instructions) J Tim Brown Investments
Date 11/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Gregory and Dawn Stone	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code 3206 Rivercrest Dr Austin, TX 78746	
Principal occupation / Job title (See Instructions) Agent and Officer		Employer (See Instructions) GREGORY K. AND DAWN STONE CROUCH FAMILY, LTD.
Date 11/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daugherty, Gerald	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 1403 Club Ridge Dr Austin, TX 78703	
Principal occupation / Job title (See Instructions) Commissioner P3		Employer (See Instructions) Travis County
Date 11/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, J Kelly	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code PO Box 26800 Austin, TX 75755	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Service Lloyds Insurance Company
Date 11/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jabour, David	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 4702 Lookuut Mountain CV Austin, TX 78731	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Twin Liquors

Contribution**FORM ATX1CONTRIB**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule ATX1: Sch: 2/3 Rpt: 9/11
2 FILER NAME Had Enough Austin?		3 Filer ID (Ethics Commission Filers) 00090519
4 Date 11/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jabour, Margaret	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code 6216 Ledge Mountain Dr Austin, TX 78731	
8 Principal occupation / Job title (See Instructions) Owner/Executive Vice President		9 Employer (See Instructions) Twin Liquors
Date 11/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Mark	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 500 W. 5th Street, Suite 100 Austin, TX 78701	
Principal occupation / Job title (See Instructions) Senior Vice President		Employer (See Instructions) IBC Bank
Date 11/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, John (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 3839 Bee Caves Road Suite 204 Austin, TX 78746	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) John Lewis Co
Date 11/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mansour, Sarah and James	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code 3824 Hunterwood Pt Austin, TX 78746	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) JAMES AND SARAH MANSOUR FOUNDATION
Date 11/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Mary (Mrs. Charles)	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code 2902 Greenlee Drive Austin, TX 78701	
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: 3/3 Rpt: 10/11
2 FILER NAME Had Enough Austin?		3 Filer ID (Ethics Commission Filers) 00090519
4 Date 11/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Vicki <hr/> 6 Contributor address; City; State; Zip Code 3201 Aztec Fall CV Austin, TX 78746	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) Dealer Principal/Owner		9 Employer (See Instructions) Lexus of Austin
Date 11/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Ellen (Ms.) <hr/> Contributor address; City; State; Zip Code 6836 Austin Center Boulevard 1-280 Austin, TX 78731	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) vcfo

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