CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple	te this form.	1 Filer ID (Ethics Comm 00090501		2 Total pages filed: 27
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
NAME	NICKNAME	Jennifer M		CUETIV	Date Received ELECTRONICALLY FILED 07/15/2021
	NICKNAME	Virden		SUFFIX	01/10/2021
4 CANDIDATE / OFFICEHOLDER		SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked
MAILING ADDRESS	8307 High Oak DR				Receipt# Amount
Change of Address	Austin, TX 78759				Date Processed
					Date Imaged
5 CAMPAIGN TREASURER		FIRST		MI	
NAME		Robin			
		LAST		SUFFIX	
		Coopwood			
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP	T / SUITE #; CITY	; STATE; ZIP CODE
TREASURER ADDRESS	4408 Spicewood Springs F	RD			
(Residence or Business)	Austin, TX 78759				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONI (512) 415-6772	E NUMBER E	EXTENSION		
8 REPORT TYPE	January 15	30th day before	election	Runoff	15th day after campaign treasurer appointment (officeholder only)
	X July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year 01/01/2021	TH	IROUGH	Month Day 06/30/20	Year 21
10 ELECTION	ELECTION DATE Month Day Year	□□P	rimary	ELECTION TYPE Runoff	Other
	11/08/2022	ズG	eneral	Special	_
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH Mayor	T (if known)
		GO T	O PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 27

13 C / OH NAME	Virden, Jennifer M		14 Filer ID 00090501	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
Ш	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (OTHER ARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 0.00
EXPENDITURE TOTALS	· · · · · · · · · · · · · · · · · · ·			\$ 11.90
	4. TOTAL POLITICAL EXPENDITURES \$ 19,591.2			
CONTRIBUTION BALANCE				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFADAVIT	•			
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		Je	nnifer M Virden	
		Signature o	f Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL AB	DVE		
		aid	, this the	day
of	, 20, to co	ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

3 of 27

			3 of 27					
18 FILER NAME Virden, Jenr	L8 FILER NAME Virden, Jennifer M 19 Filer ID (Ethics Commission Filers) 00090501							
	20 SCHEDULE SUBTOTALS NAME OF SCHEDULE							
1. X S	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 0.00					
2. X S	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00					
3. X S	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00					
4. X S	SCHEDULE E: LOANS		\$ 0.00					
5. X S	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS							
6. X S	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00					
7. S	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
8. X S	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 357.29					
9. X S	9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS							
10. S	\$							
11. 📗 S	11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS							
12. S	\$							

PLE	DGED CONTRIBU	TIONS				SCHEDULE B	
The Instruction Guide explains how to complete this form. 2 FILER NAME Virden, Jennifer M					1 Total pages Schedule B: Sch: 1/1 Rpt: 4/27		
					Filer ID (E	thics Commission Filers)	
TOTAL OF UNITEMIZED PLEDGES					\$	0.00	
5 Date	6 Full name of pledgor	out-of-state PAC (ID#:)	8	Amount of pledge (\$)	9 In-kind description (If applicable)	
	7 Pledgor Address;	City; State; Zip Code					
] [Check if travel ou	tside of Texas. Complete Schedule T	
10 Principal	occupation / Job title (See Instru	uctions)	11 Employer (See Instr	ructi	ons)		

	LOANS					SCHEDUI	ΕE
	The Instruction	on Guide explains how	orm.	1 Total pages Schedule E: Sch: 1/1 Rpt: 5/27			
	FILER NAME Virden, Jennifer	M			3 Filer ID 00090	(Ethics Commission	Filers)
4	TOTAL OF UN	IITEMIZED LOANS			•	\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)	
	Is lender a financial institution?	8 Lender address; Ci	ty; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instruction:	s)	•	
14	Description of Coll None	ateral		15 Check if personal funds w	ere deposite	d into political account (See Instructions)	
	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guarante	ed (\$)
	not applicable	18 Guarantor address; Ci	ty; State;	Zip Code			
20	Principal occupation	on		21 Employer (See Instruction:	S)		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/7 Rpt: 6/27	Virden, Jennifer M 00090501
4	Date	5 Payee name
	03/06/2021	Angela Washburn, CPA
6	Amount (\$) \$218.00	7 Payee address; City; State; Zip Code 1504 Leander RD
		Georgetown, TX 78628
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Preparation of IRS forms.
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/27/2021	Austin City Hall
	Amount (\$) \$15.00	Payee address; City; State; Zip Code 301 West 2nd ST
		Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Parking Garage (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Parking fee.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 01/13/2021	Payee name Austin Monitor
	Amount (\$) \$281.23	Payee address; City; State; Zip Code 1023 Springdale RD Suite 1J Austin, TX 78721
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Subscription (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Publication covering local politics.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Conditate/Officebolder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

teimbursement Solicitation/Fundraising Expense
ental Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Ex Legal Services The Instruction Guid	Salaries/\	Vages	s/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schodula F1:	EII ED NIANAE		-			,	Eilor ID	(Ethics Commission Eilars)
	Total pages Schedule F1: Sch: 2/7 Rpt: 7/27	Virden, Jeni					3	Filer ID 00090501	(Ethics Commission Filers)
4	Date	Payee name							
	01/24/2021	Constant Co	ntact						
6	Amount (\$)	Payee addres		State; Zip Co	ode				
	\$47.97	1601 Trape	o RD						
		Waltham, M	A 02451						
8	PURPOSE				(b)	Docorintica			
°	OF		e Categories listed at the t		(D)	Description	outci	do of Toyas Com	plete Schedule T.
	EXPENDITURE	Onice Overl	nead/Rental Expe	nse		<u> </u>		officeholder living	
						Email commu			, ,
-	Complete ONLY if direct	Candidate/Offic	coholdor nama	Office	labt			Office he	old.
9	expenditure to benefit C/O	Cariuluate/Offi	леновиет патпе	Office sou	ignt			Office ne	tiu
	Date	Payee name							
	02/22/2021	Constant Co	ontact						
	Amount (\$)	Payee addres	ss; City;	State; Zip Co	ode				
	\$47.97	1601 Trapel	-	•					
	÷								
		\\/a 4	A 02454						
		Waltham, M	A U2451						
	PURPOSE	Category (Se	e Categories listed at the t	top of this schedule)	(b)	Description			
	OF EXPENDITURE	Office Overl	nead/Rental Expe	nse		=			plete Schedule T.
	- -					—		officeholder living	g expense
						Email commu	II IIC	alions.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Office	ceholder name	Office sou	ıght			Office he	eld
L	experiulture to beliefit C/Of								
	Date	Payee name				-			
	03/17/2021	Constant Co	ontact						
-	Amount (\$)	Payee addres		State; Zip Co	nde				
	\$47.97	1601 Trapel	-	Ciaio, Zip Ci					
	φ41.91	TOOT Hape							
L		Waltham, M	A 02451		_				
	PURPOSE	Category (Se	e Categories listed at the t	top of this schedule)	(b)	Description			
	OF EXPENDITURE		nead/Rental Expe			ш			plete Schedule T.
	LAF LINDI I URE		-					officeholder living	g expense
						Email commu	ınic	ations.	
L					L				
	Complete ONLY if direct	Candidate/Offic	ceholder name	Office sou	ıght			Office he	eld
	expenditure to benefit C/OI								

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/7 Rpt: 8/27	Virden, Jennifer M 00090501
4	Date	5 Payee name
	03/22/2021	Constant Contact
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$47.97	1601 Trapelo RD
		Waltham, MA 02451
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Email communications.
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/17/2021	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$47.97	1601 Trapelo RD
		Waltham, MA 02451
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Email communications.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Device same
	05/17/2021	Payee name Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$47.97	1601 Trapelo RD
L		Waltham, MA 02451
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Email communications.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/7 Rpt: 9/27	Virden, Jennifer M 00090501
4	Date	5 Payee name
	06/17/2021	Constant Contact
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$47.97	1601 Trapelo RD
		·
		Waltham, MA 02451
8	PURPOSE	
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Email communications.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	01/01/2021	Fudman, Ed (Dr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,000.00	5910 Doone Valley CT
	. ,	
		Austin, TX 78731
_	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Manager
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	01/25/2021	McClellan, Rhonda
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	8402 Daleview DR
		Austin, TX 78757
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Bookkeeping.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experialitie to beliefft C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/7 Rpt: 10/27	Virden, Jennifer M 00090501
4	Date	5 Payee name
L	02/02/2021	Najvar Law Firm PLLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10,000.00	2180 N Loop W
		#255
L		Houston, TX 77018
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Legal Services Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Legal fees.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experientare to benefit G/OI	
	Date	Payee name
	03/12/2021	Office Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$86.49	4501 W. Braker LN
L		Austin, TX 78759
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if the real outside of Taylor Complete Schedule T
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Office supplies.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experialiture to benefit C/Oi	
	Date	Payee name
L	02/11/2021	Parsons, Brad
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3706 Greystone DR
		Austin, TX 78731
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Salaries/Mages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Assistant
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experiorale to belieff C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/7 Rpt: 11/27	Virden, Jennifer M 00090501
4	Date	5 Payee name
	04/09/2021	Parsons, Brad
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	3706 Greystone DR
		Austin, TX 78731
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Assistant
		Sampaig. Prostant
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	04/09/2021	PostNet
H	Amount (\$)	Payee address; City; State; Zip Code
	\$41.98	3571 Far West BLVD
		Austin, TX 78731
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Ballot information for speaking engagement.
		Dance mornation for speaking engagement.
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	02/04/2021	The UPS Store
H	Amount (\$)	Payee address; City; State; Zip Code
	\$180.00	8127 Mesa DR
		Suite #B206
		Austin, TX 78759
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		USPS post office box rental.
\vdash	Complete ONLY if alias -t	Condidate/Officeholder name Office country
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
\vdash	•	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gifl/Awards/Memorials Expense Legal Services 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)

	Credit Card Payment		The Instruction Guide ex	plains how to	comple	lete this form.
1	Total pages Schedule F1:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 7/7 Rpt: 12/27		Virden, Jennifer M			00090501
4	Date	5	Payee name			·
	02/02/2021		UFCU			
6	Amount (\$) \$12.00	7	Payee address; City; P. O. Box 9350	State; Zip	Code	
L			Austin, TX 78766		_	
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top o Accounting/Banking	f this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Processing fee.
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	Office s	ought	: Office held
ſ	Date		Payee name			
	04/07/2021		Waterloo Media			
	Amount (\$) \$2,205.00		Payee address; City; 8309 N. IH 35	State; Zip	Code	
			Austin, TX 78753			
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top o Advertising Expense	f this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Radio ads.
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	Office s	ought	: Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense		syment/Reimbursement rhead/Rental Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District				
Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards/Memorials Expense	Printing Ex		Travel Out of District OTHER (enter a category not listed above)				
	The Instruction Guide exp			(* ** ** ******************************				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Sch: 1/9 Rpt: 13/27	Virden, Jennifer M			00090501				
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CRE	DIT CARD	\$ 0.00				
5 Date 01/23/2021	6 Payee name Intuit QuickBooks Online							
7 Amount (\$) \$26.65	2632 Marine Way							
	Mountain View, CA 94043							
9 TYPE OF EXPENDITURE	X Political	Non-Poli	tical					
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Accounting/Banking	his schedule)	ш	outside of Texas. Complete Schedule T. n, TX, officeholder living expense J.				
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name	Office sou	ght	Office held				
Date	Payee name							
02/23/2021	Intuit QuickBooks Online							
Amount (\$) \$26.65	Payee address; City; S 2632 Marine Way Mountain View, CA 94043	State; Zip Co	de					
TYPE OF EXPENDITURE	X Political	Non-Poli	tical					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Accounting/Banking	his schedule)	<u> </u>	outside of Texas. Complete Schedule T. n, TX, officeholder living expense 3.				
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sou	ght	Office held				

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
Sch: 2/9 Rpt: 14/27	Virden, Jennifer M		00090501					
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO	A CREDIT CARD	\$ 0.00					
5 Date 03/23/2021	6 Payee name Intuit QuickBooks Online							
7 Amount (\$) \$26.65	8 Payee address; City; State 2632 Marine Way Mountain View, CA 94043	2632 Marine Way						
9 TYPE OF EXPENDITURE	X Political	Non-Political						
10 PURPOSE	(a) Category (See Categories listed at the top of this sch	edule) (b) Description						
OF EXPENDITURE	Accounting/Banking	<u> </u>	outside of Texas. Complete Schedule T. , TX, officeholder living expense					
11 Complete ONLY if direct expenditure to benefit C/OF		Office sought	Office held					
Date	Payee name							
04/23/2021	Intuit QuickBooks Online							
Amount (\$) \$26.65	Payee address; City; State 2632 Marine Way Mountain View, CA 94043	; Zip Code						
TYPE OF EXPENDITURE	X Political	Non-Political						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sch Accounting/Banking	Check if travel of	outside of Texas. Complete Schedule T. , TX, officeholder living expense					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Office sought	Office held					

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/9 Rpt: 15/27 Virden, Jennifer M 00090501 \$ 0.00 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Date Payee name 05/23/2021 Intuit QuickBooks Online Amount (\$) Payee address; City; State; Zip Code \$26.65 2632 Marine Way Mountain View, CA 94043 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Bookkeeping. Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/20/2021 wix.com

SCHEDULE F4

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 10(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica		Polling Ex se Printing E		Travel in Distr Travel Out of	
	The Instruction Guide ex	xplains how to co	emplete this form.		
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID	(Ethics Commission Filers)
Sch: 4/9 Rpt: 16/27	Virden, Jennifer M			00090501	L
4 TOTAL OF UNITEMI	ZED EXPENDITURES CHARGE	D TO A CRE	DIT CARD	\$	0.00
5 Date	6 Payee name				
01/20/2021	wix.com				
7 Amount (\$) \$7.03	8 Payee address; City; 2601 Mission ST	State; Zip Co	ode		
	San Francisco, CA 94110				
9 TYPE OF EXPENDITURE	X Political	Non-Pol	itical		
10 PURPOSE	(a) Category (See Categories listed at the top of	of this schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense		_	outside of Texas. Co	omplete Schedule T.
EXPENDITORE			🗀	n, TX, officeholder liv	- ·
			Campaign e	mail address e	expense.
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	<u> </u> ught	Office	held
Date	Payee name				
06/17/2021	wix.com				
Amount (\$)	Payee address; City;	State; Zip Co	ode		
\$30.31	2601 Mission ST				
\$30.31					
\$30.31					
\$30.31 TYPE OF EXPENDITURE	2601 Mission ST	Non-Pol	itical		
TYPE OF EXPENDITURE PURPOSE	2601 Mission ST San Francisco, CA 94110		itical (b) Description		
TYPE OF EXPENDITURE	2601 Mission ST San Francisco, CA 94110 X Political	of this schedule)	(b) Description Check if travel	outside of Texas. Co	
TYPE OF EXPENDITURE PURPOSE OF	2601 Mission ST San Francisco, CA 94110 X Political (a) Category (See Categories listed at the top of	of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder liv	ing expense
TYPE OF EXPENDITURE PURPOSE OF	2601 Mission ST San Francisco, CA 94110 X Political (a) Category (See Categories listed at the top of	of this schedule)	(b) Description Check if travel Check if Austin		ing expense
TYPE OF EXPENDITURE PURPOSE OF	2601 Mission ST San Francisco, CA 94110 X Political (a) Category (See Categories listed at the top of Office Overhead/Rental Expense Candidate/Officeholder name	of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder liv	ing expense ervice.
TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	2601 Mission ST San Francisco, CA 94110 X Political (a) Category (See Categories listed at the top of Office Overhead/Rental Expense Candidate/Officeholder name	of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder liv rebsite build se	ing expense
TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	2601 Mission ST San Francisco, CA 94110 X Political (a) Category (See Categories listed at the top of Office Overhead/Rental Expense Candidate/Officeholder name	of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder liv rebsite build se	ing expense ervice.
TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	2601 Mission ST San Francisco, CA 94110 X Political (a) Category (See Categories listed at the top of Office Overhead/Rental Expense Candidate/Officeholder name	of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder liv rebsite build se	ing expense ervice.
TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	2601 Mission ST San Francisco, CA 94110 X Political (a) Category (See Categories listed at the top of Office Overhead/Rental Expense Candidate/Officeholder name	of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder liv rebsite build se	ing expense ervice.
TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	2601 Mission ST San Francisco, CA 94110 X Political (a) Category (See Categories listed at the top of Office Overhead/Rental Expense Candidate/Officeholder name	of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder liv rebsite build se	ing expense
TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	2601 Mission ST San Francisco, CA 94110 X Political (a) Category (See Categories listed at the top of Office Overhead/Rental Expense Candidate/Officeholder name	of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder liv rebsite build se	ing expense
TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	2601 Mission ST San Francisco, CA 94110 X Political (a) Category (See Categories listed at the top of Office Overhead/Rental Expense Candidate/Officeholder name	of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder liv rebsite build se	ing expense
TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	2601 Mission ST San Francisco, CA 94110 X Political (a) Category (See Categories listed at the top of Office Overhead/Rental Expense Candidate/Officeholder name	of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder liv rebsite build se	ing expense ervice.
TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	2601 Mission ST San Francisco, CA 94110 X Political (a) Category (See Categories listed at the top of Office Overhead/Rental Expense Candidate/Officeholder name	of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder liv rebsite build se	ing expense

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense		ayment/Reimbursement erhead/Rental Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expens Travel in District	se
Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards/Memorials Expens	se Printing E		Travel Out of District OTHER (enter a category not listed above)	
	The Instruction Guide ex			- · · - · · (- · · · · · · · · · · · · ·	
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission F	ilers)
Sch: 5/9 Rpt: 17/27	Virden, Jennifer M			00090501	
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	D TO A CRE	DIT CARD	\$ 0.00	
5 Date 02/20/2021	6 Payee name				
7 Amount (\$)	wix.com 8 Payee address; City;	State; Zip Co	udo.		
\$7.03	2601 Mission ST	State, Zip Ct	oue		
Ψ1.00	2001 (VIII) 51011 61				
	San Francisco, CA 94110				
9 TYPE OF EXPENDITURE	X Political	Non-Pol	tical		
10 PURPOSE	(a) Category (See Categories listed at the top of	of this schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense)	ш	outside of Texas. Complete Schedule T. , TX, officeholder living expense	
				nail address expense.	
			1 3	,	
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held	
Date	Payee name				
03/17/2021	wix.com				
Amount (\$)	Payee address; City;	State; Zip Co	ode		
\$30.31	2601 Mission ST				
	San Francisco, CA 94110				
TYPE OF					
EXPENDITURE	X Political	Non-Pol	tical		
PURPOSE	(a) Category (See Categories listed at the top of	of this schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense)		outside of Texas. Complete Schedule T. , TX, officeholder living expense	
				ebsite build service.	
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name H	Office sou	ght	Office held	

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	d Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ins how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	·	·	3 Filer ID (Ethics Commission Filers)
Sch: 6/9 Rpt: 18/27	Virden, Jennifer M		00090501
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$ 0.00
5 Date 03/20/2021	6 Payee name wix.com		
7 Amount (\$) \$7.03	2601 Mission ST	ate; Zip Code	
	San Francisco, CA 94110		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense mail address expense.
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
04/17/2021	wix.com		
Amount (\$) \$30.31	Payee address; City; St 2601 Mission ST San Francisco, CA 94110	ate; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE	(2) Cotogon / (Coo Cotogonico lictory at the top of this	s schedule) (b) Description	
OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ebsite build service.
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Overhea Polling Expens Printing Expen Salaries/Wage	se s/Contract Labor	Travel in District Travel Out of Dis	quipment & Related Expense
1 Total pages Schedule F4:	·		3	Filer ID	(Ethics Commission Filers)
Sch: 7/9 Rpt: 19/27	Virden, Jennifer M			00090501	(
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDI	T CARD \$		0.00
5 Date 05/17/2021	6 Payee name wix.com		•		
7 Amount (\$) \$30.31	8 Payee address; City; S 2601 Mission ST	State; Zip Code			
9 TYPE OF	San Francisco, CA 94110				
9 TYPE OF EXPENDITURE	X Political	Non-Politica	l		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Office Overhead/Rental Expense	is schedule) (b)	<u>—</u>	side of Texas. Comp K, officeholder living site build serv	expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought		Office he	eld
Date 05/20/2021	Payee name wix.com				
Amount (\$) \$7.03	Payee address; City; S 2601 Mission ST San Francisco, CA 94110	State; Zip Code			
TYPE OF EXPENDITURE	X Political [Non-Politica	I		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Office Overhead/Rental Expense	iis schedule) (b)	\Box	side of Texas. Com X, officeholder living ill address ex	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought		Office he	eld

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense		ayment/Reimbursement erhead/Rental Expense	Solicitation/Fundraising Transportation Equipm Travel in District	g Expense nent & Related Expense
Contributions/ Donations Made By Candidate/Officeholder/Politica	 Gift/Awards/Memorials Expens 	se Printing E		Travel Out of District OTHER (enter a categ	ory not listed above)
	The Instruction Guide ex			, , , , , , , , , ,	.,,
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Etl	hics Commission Filers)
Sch: 8/9 Rpt: 20/27	Virden, Jennifer M			00090501	
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	D TO A CRE	DIT CARD	\$	0.00
5 Date 06/20/2021	6 Payee name wix.com				
7 Amount (\$)	8 Payee address; City;	State; Zip Co	ode		
\$7.03	2601 Mission ST				
	San Francisco, CA 94110				
9 TYPE OF EXPENDITURE	X Political	Non-Pol	itical		
10 PURPOSE	(a) Category (See Categories listed at the top of	f this schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense	;	ı ⊔	outside of Texas. Complete : n, TX, officeholder living expe	
			🗀	nail address expen	
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sou	ight	Office held	
Date	Payee name				
02/17/2021	wix.com				
Amount (\$)	Payee address; City;	State; Zip Co	ode		
\$30.31	2601 Mission ST				
	San Francisco, CA 94110				
TYPE OF EXPENDITURE	X Political	Non-Pol	itical		
PURPOSE OF	(a) Category (See Categories listed at the top of		(b) Description		
EXPENDITURE	Office Overhead/Rental Expense	,	l <u>–</u>	outside of Texas. Complete : n, TX, officeholder living expe	
			Campaign w	ebsite build service	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	ight	Office held	

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 9/9 Rpt: 21/27 Virden, Jennifer M 00090501 \$ 0.00 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 04/20/2021 wix.com Amount (\$) Payee address; City; State; Zip Code \$7.03 2601 Mission ST San Francisco, CA 94110 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign email address expense. Office sought 11 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	nmittee	Food/Beverage Expens Gift/Awards/Memorials I Legal Services The Instruction Gu	Expense		xpense Vages/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not	t listed above)	
1	Total pages Schedule G:	2	FILER NAME					3	Filer ID (Ethics Con	nmission Filers)
L	Sch: 1/6 Rpt: 22/27	L '	Virden, Jen	nifer M					00090501	
4	Date	5	Payee name							
	02/17/2021		Capital One	•						
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode			
	\$30.31		P. O. Box 6	0599						
	X Reimbursement from political contributions intended		City of Indu	stry, CA 91716						
8	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sch	edule)	(b) Description	=	eck if travel outside of Texas.	
	OF EXPENDITURE		Credit Card	Payment			<u> </u>		eck if Austin, TX, officeholder	
							Payment of credi service.	t ca	rd bill for campaign	website build
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Can	didate/Officel	nolder name			Office sought		Office held	
	Date		Payee name							
	02/17/2021		Capital One	!						
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	ode			
	\$7.03		P. O. Box 6	0599						
	X Reimbursement from political contributions intended		City of Indu	stry, CA 91716						
	PURPOSE OF		Category (Se	ee Categories listed at th	e top of this sche	edule)	Description	_	eck if travel outside of Texas.	
	EXPENDITURE		Credit Card	-			_	eck if Austin, TX, officeholder		
							Credit card payment for campaign email address expense.			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Can	didate/Officel	nolder name			Office sought		Office held	
	Date		Payee name							
	03/17/2021		Capital One	!						
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	ode			
	\$30.31		P. O. Box 6	0599						
	X Reimbursement from political contributions intended		City of Indu	stry, CA 91716						
	PURPOSE		Category (Se	ee Categories listed at th	e top of this sche	edule)	Description	=	eck if travel outside of Texas.	
	OF EXPENDITURE		Credit Card	Payment				_	eck if Austin, TX, officeholder	
							Credit card paym	ent	for campaign websi	ite build service.
	Complete ONLY if direct expenditure to benefit C/OH	Can	didate/Officel	nolder name			Office sought		Office held	

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			g Expense es/Wages/Contract Labor complete this form.	Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 2/6 Rpt: 23/27		Virden, Jennifer M		00090501
4	Date	5	Payee name		
	03/17/2021		Capital One		
6	Amount (\$)	7	Payee address; City; State; Zip	Code	
	\$7.03		P. O. Box 60599		
	Reimbursement from				
	X political contributions intended		City of Industry, CA 91716		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Credit Card Payment	<u> </u>	Check if Austin, TX, officeholder living expense
				Credit card payr	ment for campaign email address service.
9	Complete ONLY if direct	Car	ndidate/Officeholder name	Office sought	Office held
	expenditure to benefit	Cui	nuluate/Onlecholder Harne	Office 30ugnt	Office field
	C/OH				
	Date		Payee name		
	04/19/2021		Capital One		
	Amount (\$)		Payee address; City; State; Zip	Code	
	\$30.31		P. O. Box 60599		
	Reimbursement from				
	X political contributions intended		City of Industry, CA 91716		
	PURPOSE		Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Credit Card Payment	[Check if Austin, TX, officeholder living expense
				Credit card payr	ment for campaign website build service.
Г		Car	ndidate/Officeholder name	Office sought	Office held
	expenditure to benefit C/OH				
H		_			
	Date		Payee name		
	04/19/2021	L	Capital One		
	Amount (\$)		Payee address; City; State; Zip	Code	
	\$7.03		P. O. Box 60599		
	Reimbursement from political contributions				
	X political contributions intended		City of Industry, CA 91716		
	PURPOSE		Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Credit Card Payment	l l	Check if Austin, TX, officeholder living expense
				Credit card payr	ment for campaign email address service.
	Complete ONLY if direct expenditure to benefit	Car	ndidate/Officeholder name	Office sought	Office held
L	C/OH				

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Baymont

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl		Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule G:	2 FILER NAM	F			3 Filer ID (Ethics Commission File	ers)
_	Sch: 3/6 Rpt: 24/27	Virden, Jer				00090501	
4	Date	5 Payee name	<u> </u>			1	
	05/19/2021	Capital On					
6	Amount (\$)	7 Payee addre	ess; City; S	tate; Zip C	ode		
	\$30.31	P. O. Box 6	60599				
	X Reimbursement from political contributions intended	City of Indu	ıstry, CA 91716		,		
8	PURPOSE	(a) Category (s	See Categories listed at the top of th	is schedule)	(b) Description	Check if travel outside of Texas. Complete Sched	dule T.
	OF EXPENDITURE	Credit Card	d Payment		L	Check if Austin, TX, officeholder living expense	
					Credit card payr	nent for campaign website build ser	vice.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought	Office held	
	Date	Payee name)				
	05/19/2021	Capital On	е				
	Amount (\$)	Payee addre	ess; City; S	tate; Zip C	ode		
	\$7.03	P. O. Box 6	•	, ,			
	Reimbursement from						
	political contributions intended	City of Indu	ıstry, CA 91716				
	PURPOSE OF	Category (s	See Categories listed at the top of th	is schedule)	Description	Check if travel outside of Texas. Complete Sched	dule T.
	EXPENDITURE	Credit Card	d Payment		L	Check if Austin, TX, officeholder living expense	
					Credit card payr	nent for campaign email address se	ervice.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	I Candidate/Office	holder name		Office sought	Office held	
	Date	Payee name	<u> </u>				
	06/17/2021	Capital On					
	Amount (\$)	Payee addre		tate; Zip C	ode		
	\$30.31	P. O. Box 6		, <u></u> .p o			
		1.0.00	,0000				
	X Reimbursement from political contributions intended	City of Indu	ıstry, CA 91716				
	PURPOSE	Category (s	See Categories listed at the top of th	is schedule)	Description	Check if travel outside of Texas. Complete Sched	dule T.
	OF EXPENDITURE	Office Ove	rhead/Rental Expense		L L	Check if Austin, TX, officeholder living expense	
					Campaign webs	ite build service.	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought	Office held	

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

pense Travel in Di kpense Travel Out (//ages/Contract Labor OTHER (er

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment		mmittee Legal Services Salaries/A The Instruction Guide explains how to co	Wages/Contract Labor		OTHER (enter a category not listed above)		
1	Total pages Schedule G:	2	FILER NAME		3	Filer ID (Ethics Commission Filers)		
	Sch: 4/6 Rpt: 25/27		Virden, Jennifer M			00090501		
4	Date	5	Payee name					
	06/17/2021		Capital One					
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode				
	\$7.03		P. O. Box 60599					
	Reimbursement from							
	X political contributions intended		City of Industry, CA 91716					
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b) Description	С	check if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE		Office Overhead/Rental Expense		С	check if Austin, TX, officeholder living expense		
	EXPENDITURE			Campaign email	ado	dress service.		
9	Complete ONLY if direct	Car	ndidate/Officeholder name	Office sought		Office held		
	expenditure to benefit			3				
	C/OH							
	Date		Payee name					
	01/29/2021		Chase Card Services					
	Amount (\$)	H	Payee address; City; State; Zip Co	ode				
	\$26.65		P. O. Box 6294					
	Reimbursement from							
	political contributions intended		Carol Stream, IL 60197					
	PURPOSE		Category (See Categories listed at the top of this schedule)	Description	C	check if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE		Credit Card Payment			Check if Austin, TX, officeholder living expense		
				Credit card paym	en	t for QuickBooks Online service.		
		Car	ndidate/Officeholder name	Office sought		Office held		
	expenditure to benefit C/OH							
	C/OI1							
	Date		Payee name					
	02/25/2021		Chase Card Services					
	Amount (\$)		Payee address; City; State; Zip Co	ode				
	\$26.65		P. O. Box 6294					
	Reimbursement from							
	X political contributions intended		Carol Stream, IL 60197					
	PURPOSE		Category (See Categories listed at the top of this schedule)	Description	₹.	check if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE		Credit Card Payment		С	check if Austin, TX, officeholder living expense		
	LXI LINDITORL			Credit card paym	en	t for QuickBooks Online service.		
		Car	ndidate/Officeholder name	Office sought		Office held		
	expenditure to benefit C/OH							
L	С/ОП							

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Baymont

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Gift/Awards/Memorials E Legal Services The Instruction Gu	•		Vages/Contract Labor	Travel Out OTHER (er	of District hter a category not listed a	bove)
1	Total pages Schedule G:	2 F	FILER NAME					3 Filer ID	(Ethics Commissi	on Filers)
	Sch: 5/6 Rpt: 26/27	\	Virden, Jenr	nifer M				0009050	01	
4	Date	5 F	Payee name							
	03/30/2021		Chase Card	Services						
6	Amount (\$)	7 F	Payee addres	ss; City;	State;	Zip Co	ode			
	\$26.65	F	P. O. Box 62	294						
	Reimbursement from political contributions intended	(Carol Strear	n, IL 60197						
8	PURPOSE	(a) (Category (Se	e Categories listed at th	e top of this sch	edule)	(b) Description	Check if travel	outside of Texas. Comple	ete Schedule T.
	OF EXPENDITURE	(Credit Card	Payment			l L	Check if Austin	n, TX, officeholder living ex	pense
							Credit card paym	nent for Quic	ckBooks Online s	ervice.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cano	didate/Officeh	older name			Office sought		Office held	
	Date	F	Payee name							
	04/28/2021	(Chase Card	Services						
	Amount (\$)	F	Payee addres	ss; City;	State;	Zip Co	ode			
	\$26.65	F	P. O. Box 62	294						
	Reimbursement from									
	X political contributions intended		Carol Strear	n, IL 60197						
	PURPOSE		Category (Se	e Categories listed at th	e top of this sche	edule)	Description [Check if travel	outside of Texas. Comple	ete Schedule T.
	OF EXPENDITURE	(Credit Card	Payment				Check if Austin	n, TX, officeholder living ex	pense
							Credit card paym	nent for Quid	ckBooks Online s	ervice.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cano	didate/Officeh	older name			Office sought		Office held	
	Date		Davoe name							
	06/01/2021	1	Payee name Chase Card	Services						
_		├			Ctata	7in Ca	- d-			
	Amount (\$) \$26.65	l	Payee addres P. O. Box 62		State;	Zip Co	Jue			
	\$∠0.05	'	P. O. BOX 6	294						
	X Reimbursement from political contributions intended	(Carol Strear	m, IL 60197						
	PURPOSE	(Category (Se	e Categories listed at th	e top of this sche	edule)	Description	-	outside of Texas. Comple	
	OF EXPENDITURE	(Credit Card	Payment			L	_	n, TX, officeholder living ex	
							Credit card payn	nent for Quid	ckBooks Online s	ervice.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cano	didate/Officeh	older name			Office sought		Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Total pages Schedule G: Filer ID (Ethics Commission Filers) Sch: 6/6 Rpt: 27/27 Virden, Jennifer M 00090501 Date Payee name 06/29/2021 Chase Card Services 6 Amount (\$) Payee address; City; State; Zip Code \$26.65 P. O. Box 6294 Reimbursement from political contributions intended Х Carol Stream, IL 60197 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** Credit card payment for QuickBooks Online service. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH