

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) 00090501		2 Total pages filed: 163	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Jennifer M		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/13/2022		
	NICKNAME LAST SUFFIX Virden				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 8307 High Oak DR Austin, TX 78759			Date Hand-delivered or Date Postmarked	
				Receipt # Amount	
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Robin				
	NICKNAME LAST SUFFIX Coopwood				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4408 Spicewood Springs RD Austin, TX 78759				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 415-6772				
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 checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 01/01/2022 06/30/2022				
10 ELECTION	ELECTION DATE Month Day Year 11/08/2022		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) Mayor		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME	Viriden, Jennifer M	14 Filer ID	(Ethics Commission Filers)
		00090501	

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 type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 50.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 84,506.54
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 62,397.11
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 347,616.12
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 300,000.00

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.

Jennifer M Viriden

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

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

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18 FILER NAME Virden, Jennifer M		19 Filer ID (Ethics Commission Filers) 00090501
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 83,365.54
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,141.00
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	\$ 62,397.11
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 type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
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: 1/107 Rpt: 4/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abernathy , C. <hr/> 6 Contributor address; City; State; Zip Code 4013 Walnut Clay DR Austin , TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 05/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Barbara <hr/> Contributor address; City; State; Zip Code 4200 Jackson Ave Westminster Manor Apt. 1013 Austin , TX 78731	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Barbara <hr/> Contributor address; City; State; Zip Code 4200 Jackson Ave Westminster Manor Apt. 1013 Austin , TX 78731	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aicklen, Chad <hr/> Contributor address; City; State; Zip Code 8402 Mesa Doble LN Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albrecht, Kebra <hr/> Contributor address; City; State; Zip Code 5900 Tom Wooten DR Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/107 Rpt: 5/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/22/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alderson, Bill <hr/> 6 Contributor address; City; State; Zip Code P.O. Box 170969 Austin , TX 78717	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Cyber Promoter		9 Employer (See Instructions) AustinCyber.Show
Date 05/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alldredge, Michelle <hr/> Contributor address; City; State; Zip Code 1804 West 34th ST Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Event Producer		Employer (See Instructions) Panacea Collective
Date 04/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alles, Susan <hr/> Contributor address; City; State; Zip Code 3712 Green Trails North Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alm, Ronald <hr/> Contributor address; City; State; Zip Code 11304 Pradera DR Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarado, Henry <hr/> Contributor address; City; State; Zip Code 11001 Canterbury Tales LN Austin , TX 78748	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Management		Employer (See Instructions) Capitol Chevy

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/107 Rpt: 6/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/30/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvis, John <hr/> 6 Contributor address; City; State; Zip Code 14800 Banbridge TRL Austin, TX 78717	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Facility Manager		9 Employer (See Instructions) Hillcrest Baptist Church
Date 06/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ambs, Dana <hr/> Contributor address; City; State; Zip Code 3907 Grayson LN Austin, TX 78722	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Realtor, Designer		Employer (See Instructions) Self-Employed
Date 06/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Janet <hr/> Contributor address; City; State; Zip Code 3803 Mia Tia CIR Austin , TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Systems Engineer		Employer (See Instructions) Novogradac & Co
Date 02/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Thomas <hr/> Contributor address; City; State; Zip Code 5418 Tortuga TR Austin , TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Education K-12		Employer (See Instructions) Retired
Date 06/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Thomas <hr/> Contributor address; City; State; Zip Code 5418 Tortuga TR Austin , TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Education K-12		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/107 Rpt: 7/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/22/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Thomas <hr/> 6 Contributor address; City; State; Zip Code 5418 Tortuga TR Austin , TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Education K-12		9 Employer (See Instructions) Retired
Date 06/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apple, JB <hr/> Contributor address; City; State; Zip Code 1109 Enclave Way Columbia, SC 29223	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Katharine <hr/> Contributor address; City; State; Zip Code 3405 Oakmont BLVD Austin, TX 78703	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aune, Jon <hr/> Contributor address; City; State; Zip Code 374 King Arthur CT Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-Employed
Date 04/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bagus, Paul <hr/> Contributor address; City; State; Zip Code 6008 Maurys TRL Austin, TX 78730	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/107 Rpt: 8/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/15/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Rowland <hr/> 6 Contributor address; City; State; Zip Code 3406 Menchaca RD Unit 17 Austin, TX 78704	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) State Employee		9 Employer (See Instructions) Retired
Date 04/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barfield , Kathy <hr/> Contributor address; City; State; Zip Code 6004 Tasajillo TRL Austin , TX 78739	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes , Carolyn <hr/> Contributor address; City; State; Zip Code 3910 Silverspring Austin , TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Tara <hr/> Contributor address; City; State; Zip Code 12 Margranita Cres Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) JLM Financial Partners
Date 02/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beitzel, Derek <hr/> Contributor address; City; State; Zip Code 3806 Agape LN Austin , TX 78735	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/107 Rpt: 9/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/20/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benaglio, Michael <hr/> 6 Contributor address; City; State; Zip Code 11419 Sierra Blanca ST Austin, TX 78726	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Business Appraiser		9 Employer (See Instructions) The Benaglio Group, LLC
Date 06/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benavi, Irit <hr/> Contributor address; City; State; Zip Code 4501 Spanish Oak TRL Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 01/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Larry M. <hr/> Contributor address; City; State; Zip Code 2624 Tom Miller ST Austin, TX 78723	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Larry M. <hr/> Contributor address; City; State; Zip Code 2624 Tom Miller ST Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Larry M. <hr/> Contributor address; City; State; Zip Code 2624 Tom Miller ST Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/107 Rpt: 10/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/10/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Larry M. 6 Contributor address; City; State; Zip Code 2624 Tom Miller ST Austin, TX 78723	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 04/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Larry M. Contributor address; City; State; Zip Code 2624 Tom Miller ST Austin, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 01/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Shirley Contributor address; City; State; Zip Code 2624 Tom Miller ST Austin, TX 78723	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Shirley Contributor address; City; State; Zip Code 2624 Tom Miller ST Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Shirley Contributor address; City; State; Zip Code 2624 Tom Miller ST Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/107 Rpt: 11/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/11/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biggerstaff Ph.D, Ted <hr/> 6 Contributor address; City; State; Zip Code 3801 Far View DR Austin, TX 78730	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Computer Scientist		9 Employer (See Instructions) Retired
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biggerstaff Ph.D, Ted <hr/> Contributor address; City; State; Zip Code 3801 Far View DR Austin, TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Computer Scientist		Employer (See Instructions) Retired
Date 02/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanc, Evan <hr/> Contributor address; City; State; Zip Code 4904 Quick Water CV Austin , TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Sound Business Mgmt.
Date 06/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bohls , Laura <hr/> Contributor address; City; State; Zip Code 3801 Eastledge DR Austin , TX 78731	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bohls, Rex <hr/> Contributor address; City; State; Zip Code 3801 Eastledge DR Austin , TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/107 Rpt: 12/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/10/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boudreau, Edward <hr/> 6 Contributor address; City; State; Zip Code 5711 Rain Creek PKWY Austin, TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 05/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boudreau, Edward <hr/> Contributor address; City; State; Zip Code 5711 Rain Creek PKWY Austin, TX 78759	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowen, Jeffrey <hr/> Contributor address; City; State; Zip Code 8404 Caspian Drive Austin , TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Jeffery L. Bowen & Associates
Date 03/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowen Jr., C. Michael <hr/> Contributor address; City; State; Zip Code 6605 West Courtyard DR Austin , TX 78730	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 03/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradfield Woody, Brenda L. <hr/> Contributor address; City; State; Zip Code 2204 Point Bluff DR Austin , TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Micheladas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/107 Rpt: 13/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/13/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brand , Merry <hr/> 6 Contributor address; City; State; Zip Code 10900 Sage Oak CV Austin , TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Administration		9 Employer (See Instructions) TCEQ
Date 03/03/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brantley, Jeff <hr/> Contributor address; City; State; Zip Code 5900 Republic of Texas BLVD Austin , TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Product		Employer (See Instructions) USAA
Date 06/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brantley, Sharon <hr/> Contributor address; City; State; Zip Code 5900 Republic of Texas BLVD Austin , TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Brantley Marketing
Date 06/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breed , Cynthia <hr/> Contributor address; City; State; Zip Code 6601 Robbie Creek CV Austin , TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self
Date 01/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breedlove, Deanne <hr/> Contributor address; City; State; Zip Code 1709 Manana ST Austin , TX 78730	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/107 Rpt: 14/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 01/04/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breedlove, Shawn <hr/> 6 Contributor address; City; State; Zip Code 1709 Manana ST Austin, TX 78730	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) SonWest Co
Date 01/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Gary Lee <hr/> Contributor address; City; State; Zip Code 11909 Oakwood DR Austin, TX 78753	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 01/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Margaret A. <hr/> Contributor address; City; State; Zip Code 11909 Oakwood DR Austin, TX 78753	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 03/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Margaret A. <hr/> Contributor address; City; State; Zip Code 11909 Oakwood DR Austin, TX 78753	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 06/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant , M. D. <hr/> Contributor address; City; State; Zip Code 3905 Arbor Glen Way Austin , TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Dykema Gossett

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/107 Rpt: 15/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/27/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckner, Margo <hr/> 6 Contributor address; City; State; Zip Code 6209 Ledge Mountain DR Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 05/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bueltel, Linda <hr/> Contributor address; City; State; Zip Code 3618 Leadville DR Austin , TX 78749	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buerger Ph.D, Andrew <hr/> Contributor address; City; State; Zip Code 2408 W. 8th ST Austin , TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 02/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buerger Ph.D, Andrew <hr/> Contributor address; City; State; Zip Code 2408 W. 8th ST Austin , TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 01/06/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buerger Ph.D, Andrew <hr/> Contributor address; City; State; Zip Code 2408 W. 8th ST Austin , TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/107 Rpt: 16/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/17/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bugge, Christopher J. <hr/> 6 Contributor address; City; State; Zip Code 7029 Greenshores DR Austin , TX 78730	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 05/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buhrman , Melanie <hr/> Contributor address; City; State; Zip Code 5806 Westslope CV Austin , TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 01/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bula, Gerard <hr/> Contributor address; City; State; Zip Code 2108 Trail Of Madrones Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bula, Gerard <hr/> Contributor address; City; State; Zip Code 2108 Trail Of Madrones Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkett, Donna <hr/> Contributor address; City; State; Zip Code 8173 Ceberry DR Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Texas Oncology

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/107 Rpt: 17/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/23/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burks , Calvin <hr/> 6 Contributor address; City; State; Zip Code 715 E. US Hwy 84 Evant , TX 76525	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Real Estate Broker		9 Employer (See Instructions) Self-Employed
Date 03/06/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrus, Gene <hr/> Contributor address; City; State; Zip Code 111 Birnam Wood CT Austin , TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/06/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton , Joseph Howell <hr/> Contributor address; City; State; Zip Code 2113 Zach Scott ST Austin , TX 78723	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) Senior Project Manager		Employer (See Instructions) Jones Lang LaSalle
Date 06/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Busse , Beth <hr/> Contributor address; City; State; Zip Code 8007 Greenslope DR Austin , TX 78759	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Sr. IT Manager		Employer (See Instructions) UT Austin
Date 04/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Kelly <hr/> Contributor address; City; State; Zip Code 8504 Millway DR Austin , TX 78757	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Central Texas Soaring Assn, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/107 Rpt: 18/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cales , Kenneth <hr/> 6 Contributor address; City; State; Zip Code 4743 Cat Mountain DR Austin , TX 78731	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Practice Manager		9 Employer (See Instructions) North Austin Pediatrics
Date 06/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canfield, Philip <hr/> Contributor address; City; State; Zip Code 202 Nueces ST Austin , TX 78701	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Ariet Capital
Date 03/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carnahan, Celeste <hr/> Contributor address; City; State; Zip Code 8702 Colonial DR Austin , TX 78758	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 05/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carty , Nathaniel <hr/> Contributor address; City; State; Zip Code 7300 Red Pebble RD Austin , TX 78739	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Home Builder		Employer (See Instructions) Carty Custom Builders
Date 06/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carty , Nathaniel <hr/> Contributor address; City; State; Zip Code 7300 Red Pebble RD Austin , TX 78739	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Residential Construction		Employer (See Instructions) Carty Custom Builders

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/107 Rpt: 19/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caudle, Molly <hr/> 6 Contributor address; City; State; Zip Code 1601 Manana ST Austin , TX 78730	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Agent		9 Employer (See Instructions) State Farm Insurance
Date 06/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caveney , Emily <hr/> Contributor address; City; State; Zip Code 3913 Gyrfalcon CV Austin , TX 78738	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 01/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Celko, Joe <hr/> Contributor address; City; State; Zip Code 4301 Kilgore LN Austin , TX 78727	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self
Date 06/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Collin <hr/> Contributor address; City; State; Zip Code 6515 Hiridge Hollow DR Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Enterprise Architect		Employer (See Instructions) General Motors
Date 06/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan , William <hr/> Contributor address; City; State; Zip Code 4700 Island CV Austin , TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Management		Employer (See Instructions) Iodine

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/107 Rpt: 20/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/10/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlton , David <hr/> 6 Contributor address; City; State; Zip Code 4609 Chiappero TR Austin , TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 06/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlton , David <hr/> Contributor address; City; State; Zip Code 4609 Chiappero TR Austin , TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chastain, Stephen <hr/> Contributor address; City; State; Zip Code 3501 Peregrine Falcon DR Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chastain, Stephen <hr/> Contributor address; City; State; Zip Code 3501 Peregrine Falcon DR Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chastain, Stephen <hr/> Contributor address; City; State; Zip Code 3501 Peregrine Falcon DR Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/107 Rpt: 21/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 01/31/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chastain, Stephen <hr/> 6 Contributor address; City; State; Zip Code 3501 Peregrine Falcon DR Austin, TX 78746	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 06/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chibib, Michael <hr/> Contributor address; City; State; Zip Code 7909 Ceberry DR Austin, TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bracewell
Date 04/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Bruce <hr/> Contributor address; City; State; Zip Code 1512 W. 30th ST Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney Mediator		Employer (See Instructions) Clark ADR
Date 04/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloud, Catherine <hr/> Contributor address; City; State; Zip Code 6016 Bel Fay LN Austin , TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Ascension
Date 03/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cocco, Catherine <hr/> Contributor address; City; State; Zip Code 5609 Spurflower DR Austin , TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) IBM

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/107 Rpt: 22/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/27/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cocco, Gerard <hr/> 6 Contributor address; City; State; Zip Code 5609 Spurflower DR Austin , TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) SW Developer		9 Employer (See Instructions) gCocco Software
Date 06/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffman , Amy <hr/> Contributor address; City; State; Zip Code 5707 Lakemoore DR Austin , TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Anesthesiologist		Employer (See Instructions) U.S. Anesthesia Partners
Date 02/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohn, Benjamin <hr/> Contributor address; City; State; Zip Code 12820 N. Lamar BLVD Austin , TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 01/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohn, Benjamin <hr/> Contributor address; City; State; Zip Code 12820 N. Lamar BLVD Austin , TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman , Chase <hr/> Contributor address; City; State; Zip Code 12700 Bismark DR Austin , TX 78748	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Yarrington Road Materials

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/107 Rpt: 23/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/11/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Sharon <hr/> 6 Contributor address; City; State; Zip Code 5803 Karankawa CV Austin , TX 78731	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) Self
Date 04/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Comegys , Lynne M. <hr/> Contributor address; City; State; Zip Code 4208 Creek Ledge Austin , TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conrad, Kevin <hr/> Contributor address; City; State; Zip Code 11913 Bryony DR Austin , TX 78739	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Morrison & Head
Date 01/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, John H. <hr/> Contributor address; City; State; Zip Code 7608 Fawnhollow CV Austin, TX 78750	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) HeartFlex, Inc.
Date 03/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, John H. <hr/> Contributor address; City; State; Zip Code 7608 Fawnhollow CV Austin, TX 78750	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) HeartFlex, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/107 Rpt: 24/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/12/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corro , Rommel <hr/> 6 Contributor address; City; State; Zip Code 2112 Nobleman DR Austin , TX 78754	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Administrative		9 Employer (See Instructions) Texas
Date 03/16/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Counts, Donald <hr/> Contributor address; City; State; Zip Code 2905 San Gabriel ST Austin , TX 78705	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crinkelmeyer, Oliver W. <hr/> Contributor address; City; State; Zip Code 10109 Talleyran DR Austin, TX 78750	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Cliff <hr/> Contributor address; City; State; Zip Code 11304 Vallecito CV Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 01/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuevas, Frances Quinta Roberts <hr/> Contributor address; City; State; Zip Code 2301 Lawnmont AVE Apt. 9 Austin, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/107 Rpt: 25/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/21/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cullington, Gayle <hr/> 6 Contributor address; City; State; Zip Code 901 Baylor ST Austin, TX 78703	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cupp , Charles "Buzz" <hr/> Contributor address; City; State; Zip Code 10216 Missel Thrush DR Austin , TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) Red Coach
Date 01/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dahl-Burg, Tracy <hr/> Contributor address; City; State; Zip Code 9705 Eagle Rising CV Austin, TX 78730	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Advantage Austin Properties, LLC
Date 06/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis , Donna <hr/> Contributor address; City; State; Zip Code 3006 Gilbert ST Austin , TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Donna R Davis CPA
Date 06/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Donovan <hr/> Contributor address; City; State; Zip Code 10609 D-K Ranch RD Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Danze & Davis Architects, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/107 Rpt: 26/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/10/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis , Gordon <hr/> 6 Contributor address; City; State; Zip Code 7605 Holly Oak CIR Austin , TX 78744	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Training Simulations Programmer		9 Employer (See Instructions) Internal Revenue Service
Date 05/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis , Gordon <hr/> Contributor address; City; State; Zip Code 7605 Holly Oak CIR Austin , TX 78744	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Training Simulations Programmer		Employer (See Instructions) Internal Revenue Service
Date 05/18/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davison, Wayne <hr/> Contributor address; City; State; Zip Code 11213 Deadoak LN Austin, TX 78759	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davison, Wayne <hr/> Contributor address; City; State; Zip Code 11213 Deadoak LN Austin, TX 78759	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deacutis , John A. <hr/> Contributor address; City; State; Zip Code 4807 Palisades DR Austin , TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/107 Rpt: 27/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/24/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deacutis , John A. <hr/> 6 Contributor address; City; State; Zip Code 4807 Palisades DR Austin , TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 04/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrick, Christopher <hr/> Contributor address; City; State; Zip Code 5802 Fox Chapel DR Austin , TX 78746	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 06/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devany , Brian <hr/> Contributor address; City; State; Zip Code 1000 Liberty Park DR Unit 209 Austin , TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) VP Finance		Employer (See Instructions) ResProp
Date 06/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doepner , Albert <hr/> Contributor address; City; State; Zip Code 5306 Wolf Run Austin , TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Mental Health Net - Govt Svcs
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doepner , Albert <hr/> Contributor address; City; State; Zip Code 5306 Wolf Run Austin , TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Mental Health Net - Govt Svcs

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/107 Rpt: 28/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/12/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doepner , Antonia <hr/> 6 Contributor address; City; State; Zip Code 5306 Wolf Run Austin , TX 78749	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 06/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorris, Eric <hr/> Contributor address; City; State; Zip Code 15316 Falconhead Grove LP Austin , TX 78738	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self
Date 05/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downey, Patricia <hr/> Contributor address; City; State; Zip Code 3801 Far View DR Austin, TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downey, Patricia <hr/> Contributor address; City; State; Zip Code 3801 Far View DR Austin, TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drozdz, Robert <hr/> Contributor address; City; State; Zip Code 12317 Cahone TRL Austin, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Axis Communications

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/107 Rpt: 29/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 01/31/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drozd, Robert <hr/> 6 Contributor address; City; State; Zip Code 12317 Cahone TRL Austin, TX 78729	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Axis Communications
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dufour, William <hr/> Contributor address; City; State; Zip Code 10707 Oak View DR Austin , TX 78759	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 05/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunlevy, Kevin T. <hr/> Contributor address; City; State; Zip Code 8503 Appalachian DR Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Retired
Date 02/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Don <hr/> Contributor address; City; State; Zip Code 3301 Big Bend DR Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner/CEO		Employer (See Instructions) Self/PJS of Texas
Date 02/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Margaret <hr/> Contributor address; City; State; Zip Code 3301 Big Bend DR Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/107 Rpt: 30/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eastberg, John <hr/> 6 Contributor address; City; State; Zip Code 5704 Painted Valley DR Austin, TX 78759	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Computer Professional		9 Employer (See Instructions) GM
Date 02/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edgerton, Marisa <hr/> Contributor address; City; State; Zip Code 6622 Lost Horison DR Austin , TX 78759	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self
Date 06/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edgerton, Marisa <hr/> Contributor address; City; State; Zip Code 6622 Lost Horison DR Austin , TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self
Date 06/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmonson , Mary <hr/> Contributor address; City; State; Zip Code 4404 Tamarack Trail Austin , TX 78727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Helen <hr/> Contributor address; City; State; Zip Code 5217 Old Spicewood Springs RD Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) HK Esq, PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/107 Rpt: 31/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/04/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Rosemary <hr/> 6 Contributor address; City; State; Zip Code 6528 Heron DR Austin, TX 78759	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eissler, Mark <hr/> Contributor address; City; State; Zip Code 8506 Flagstone DR Austin, TX 78757	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Recruiter		Employer (See Instructions) Mark R. Eissler & Associates
Date 05/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erminger, Dorothy <hr/> Contributor address; City; State; Zip Code 11751 D-K Ranch RD Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Loan Officer		Employer (See Instructions) Churchill Mortgage Corp.
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evert, Gaye <hr/> Contributor address; City; State; Zip Code 5920 Highland Hills DR Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fain , Miles <hr/> Contributor address; City; State; Zip Code 11408 Murcia DR Austin , TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) State of Texas

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/107 Rpt: 32/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/24/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Field, Greg <hr/> 6 Contributor address; City; State; Zip Code 7201 Spurlock DR Austin , TX 78731	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Data Engineer		9 Employer (See Instructions) Field Analytics, LLC
Date 04/18/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fields, Chris <hr/> Contributor address; City; State; Zip Code 5603 Oakwood CV Austin , TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Findlay , Gail <hr/> Contributor address; City; State; Zip Code 2005 Manana Street Austin , TX 78730	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, John <hr/> Contributor address; City; State; Zip Code 8210 Bent Tree RD Austin, TX 78759	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Austin Infiniti
Date 05/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisk, Carter <hr/> Contributor address; City; State; Zip Code 3302 Yellowpine TER Austin, TX 78757	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Yellowpine Investments

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/107 Rpt: 33/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/30/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanagan, Glenda <hr/> 6 Contributor address; City; State; Zip Code 1509 Murray LN Austin, TX 78703	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 04/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fly, Mary <hr/> Contributor address; City; State; Zip Code 6701 W. Courtyard DR Austin, TX 78730	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 02/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Charles <hr/> Contributor address; City; State; Zip Code 450 Lemens AVE Hutto, TX 78634	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Structural Engineer		Employer (See Instructions) Self-Employed
Date 06/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fredenburg , Carol <hr/> Contributor address; City; State; Zip Code 10924 River Plantation DR Austin , TX 78747	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fredenburg , Carol <hr/> Contributor address; City; State; Zip Code 10924 River Plantation DR Austin , TX 78747	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/107 Rpt: 34/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/11/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Jeff <hr/> 6 Contributor address; City; State; Zip Code 7906 Jester BLVD Austin , TX 78750	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Corporate Sales		9 Employer (See Instructions) Run.ai
Date 04/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaenzle, Gordon <hr/> Contributor address; City; State; Zip Code 6910 Rudi CV Austin , TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) IBM
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamble, Justin <hr/> Contributor address; City; State; Zip Code 6113 Charis CT Austin , TX 78735	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Sales		Employer (See Instructions) McAnally Wilkins Inc.
Date 06/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, William <hr/> Contributor address; City; State; Zip Code 3216 Bonnie RD Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geistman , Alan W. <hr/> Contributor address; City; State; Zip Code 3105 Brightwood DR Austin , TX 78746	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/107 Rpt: 35/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/21/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geistman , Jan L. <hr/> 6 Contributor address; City; State; Zip Code 3105 Brightwood DR Austin , TX 78746	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilman, Edward <hr/> Contributor address; City; State; Zip Code 2912 Cherry LN Austin, TX 78703	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) USAA
Date 05/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Litza <hr/> Contributor address; City; State; Zip Code 12335 Thompkins DR Austin , TX 78753	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Marketing Coordinator		Employer (See Instructions) Stewart Title of Austin
Date 01/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Steven <hr/> Contributor address; City; State; Zip Code 4609 Lyons RD Austin, TX 78702	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Steven <hr/> Contributor address; City; State; Zip Code 4609 Lyons RD Austin, TX 78702	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/107 Rpt: 36/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/30/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graeber, Courtney <hr/> 6 Contributor address; City; State; Zip Code 5325 Valburn CIR Austin, TX 78731	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self
Date 06/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Kyle K. <hr/> Contributor address; City; State; Zip Code 6002 Lonesome Valley TRL Austin , TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Horace <hr/> Contributor address; City; State; Zip Code 1914 W. 40th ST Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green , John Markham <hr/> Contributor address; City; State; Zip Code 98 San Jacinto BLVD Austin , TX 78701	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green , Robert L. <hr/> Contributor address; City; State; Zip Code 5002 Lynnwood ST Austin , TX 78756	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/107 Rpt: 37/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/26/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer , Earl <hr/> 6 Contributor address; City; State; Zip Code 6603 Jamaica CT Austin , TX 78757	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 03/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griggs, Stephen R. <hr/> Contributor address; City; State; Zip Code 2905 Hillview RD Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Leslie <hr/> Contributor address; City; State; Zip Code 3919 Sierra DR Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) School Counselor		Employer (See Instructions) Self
Date 03/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerrero , George <hr/> Contributor address; City; State; Zip Code 2101 Rivers Edge Way Austin , TX 78741	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) VA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Habitzeiter, Jan <hr/> Contributor address; City; State; Zip Code 1420 W. 51st ST Austin, TX 78756	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/107 Rpt: 38/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/21/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Habitzeiter, Ronald <hr/> 6 Contributor address; City; State; Zip Code 1420 W. 51st ST Austin, TX 78756	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self-Employed
Date 04/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadd , Andrew <hr/> Contributor address; City; State; Zip Code 10806 Redmond Rd Austin , TX 78739	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Regulatory Affairs		Employer (See Instructions) Natera
Date 06/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hale, Jamie <hr/> Contributor address; City; State; Zip Code 2909 W. Slaughter LN Austin , TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RA I		Employer (See Instructions) HHSC
Date 03/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halterman, Gwendolyn <hr/> Contributor address; City; State; Zip Code 3903 Woodchester LN Austin , TX 78727	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Jonna Kay <hr/> Contributor address; City; State; Zip Code 212 Bradshaw DR Austin , TX 78737	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/107 Rpt: 39/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/20/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hapka , David <hr/> 6 Contributor address; City; State; Zip Code 8209 Cliffview DR Austin , TX 78759	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Pharmacist		9 Employer (See Instructions) Walgreens
Date 04/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardeman, Bryan <hr/> Contributor address; City; State; Zip Code 6757 Airport BLVD Austin, TX 78752	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Dealership Owner		Employer (See Instructions) Continental Auto Group
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrell, Kenneth <hr/> Contributor address; City; State; Zip Code 9204 Queenswood DR Austin , TX 78748	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington , Douglas <hr/> Contributor address; City; State; Zip Code 6904 Argonne Forest CV Unit A Austin , TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 01/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris , Ron <hr/> Contributor address; City; State; Zip Code 301 Bent Tree CT West Lake Hills, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) Harris Preston & Partners

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/107 Rpt: 40/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 01/07/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris , Suzanne <hr/> 6 Contributor address; City; State; Zip Code 301 Bent Tree CT West Lake Hills, TX 78746	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 03/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison , Crystal <hr/> Contributor address; City; State; Zip Code 12936 Zen Gardens Way Austin , TX 78732	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Toshiba
Date 01/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison , Crystal <hr/> Contributor address; City; State; Zip Code 12936 Zen Gardens Way Austin , TX 78732	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Toshiba
Date 05/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatton, William <hr/> Contributor address; City; State; Zip Code 11808 Charing Cross RD Austin, TX 78759	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Construction Management		Employer (See Instructions) Sabre Commercial
Date 06/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Healey, Patrick <hr/> Contributor address; City; State; Zip Code 5201 Buffalo Pass Austin , TX 78745	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) COA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/107 Rpt: 41/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/30/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Healey, Patrick <hr/> 6 Contributor address; City; State; Zip Code 5201 Buffalo Pass Austin , TX 78745	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) COA
Date 01/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helbing, A. Edmond <hr/> Contributor address; City; State; Zip Code 9905 Brightling LN Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 04/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helms, Lee <hr/> Contributor address; City; State; Zip Code 4100 Jackson AVE Austin , TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helms, Lee <hr/> Contributor address; City; State; Zip Code 4100 Jackson AVE Austin , TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hersey , Paul <hr/> Contributor address; City; State; Zip Code P.O. Box 160784 Austin , TX 78716	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/107 Rpt: 42/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/22/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hersey , Paul <hr/> 6 Contributor address; City; State; Zip Code P.O. Box 160784 Austin , TX 78716	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 06/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herzfeld, Ron <hr/> Contributor address; City; State; Zip Code 7505 Kolache CV Austin , TX 78750	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Officer		Employer (See Instructions) Austin Oil & Gas
Date 06/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hesprich, Mark <hr/> Contributor address; City; State; Zip Code 1409 Lance Way Austin, TX 78758	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Building Contractor		Employer (See Instructions) Self-Employed
Date 04/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heye , Linda <hr/> Contributor address; City; State; Zip Code 14527 Ballimamore DR Austin, TX 78717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill , Dorman <hr/> Contributor address; City; State; Zip Code 11125 Calavar DR Austin , TX 78726	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/107 Rpt: 43/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/13/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges , Colin <hr/> 6 Contributor address; City; State; Zip Code 3102 Edgewater DR Austin , TX 78733	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self
Date 03/18/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollar, Gary <hr/> Contributor address; City; State; Zip Code 826 Walnut Creek DR Austin , TX 78753	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Maintenance		Employer (See Instructions) Hula Hut
Date 01/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollar, Gary <hr/> Contributor address; City; State; Zip Code 826 Walnut Creek DR Austin , TX 78753	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Maintenance		Employer (See Instructions) Hula Hut
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollar, Gary <hr/> Contributor address; City; State; Zip Code 826 Walnut Creek DR Austin , TX 78753	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Maintenance		Employer (See Instructions) Hula Hut
Date 03/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtzman, Margaret <hr/> Contributor address; City; State; Zip Code 5919 Overlook DR Austin , TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/107 Rpt: 44/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/12/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtzman, Mickey <hr/> 6 Contributor address; City; State; Zip Code 5919 Overlook DR Austin , TX 78731	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 05/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoogendam, Sheila <hr/> Contributor address; City; State; Zip Code 9500 Tobrina LN Austin , TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Jennifer <hr/> Contributor address; City; State; Zip Code P. O. Box 50204 Austin, TX 78763	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Management		Employer (See Instructions) Self-Employed
Date 05/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houser, Robert <hr/> Contributor address; City; State; Zip Code 3801 Hunterwood Point Austin , TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Charles Maund
Date 06/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Kenneth <hr/> Contributor address; City; State; Zip Code 4900 Interlachen LN Austin , TX 78747	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Texas GLO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/107 Rpt: 45/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/30/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Ruth 6 Contributor address; City; State; Zip Code 4900 Interlachen LN Austin , TX 78747	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Ruth Contributor address; City; State; Zip Code 4900 Interlachen LN Austin , TX 78747	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howry, Phil Contributor address; City; State; Zip Code 6201 Diamond Head CIR Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Real Estate Development		Employer (See Instructions) Phil Howry Co.
Date 03/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudgins, Jay Contributor address; City; State; Zip Code 7600 Valburn DR Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) St. Germain Street Investments		Employer (See Instructions) Self-Employed
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Humpierres, Ernesto Contributor address; City; State; Zip Code 1301 Lorrain ST Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) VMware

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/107 Rpt: 46/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/12/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurwitz, Ivan <hr/> 6 Contributor address; City; State; Zip Code 8613 Alverstone Way Austin, TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 03/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ice III, Charles O. <hr/> Contributor address; City; State; Zip Code 6302 Sierra Tahoe Austin , TX 78759	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingels , Kirk <hr/> Contributor address; City; State; Zip Code 3701 Bee Cave Rd. Ste. 201 Austin , TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Ingels Insurance Agency
Date 01/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson III, Oscar <hr/> Contributor address; City; State; Zip Code 1905 W. 30th ST Austin , TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office of Oscar B. Jackson
Date 01/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobson, Jack M. (Dr.) <hr/> Contributor address; City; State; Zip Code 6508 West Courtyard DR Austin, TX 78730	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/107 Rpt: 47/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/30/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janosky, Brian <hr/> 6 Contributor address; City; State; Zip Code 11200 Limoncillo CT Austin, TX 78750	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Experian
Date 04/16/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Glen <hr/> Contributor address; City; State; Zip Code 4103 Cat Hollow DR Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Mark <hr/> Contributor address; City; State; Zip Code 3300 Bee Caves RD Ste 650-211 West Lake Hills , TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Generation Partners
Date 02/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jobe, Connie <hr/> Contributor address; City; State; Zip Code 3705 Windsor RD Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jobe, Connie <hr/> Contributor address; City; State; Zip Code 3705 Windsor RD Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/107 Rpt: 48/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/25/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Catherine Matthews <hr/> 6 Contributor address; City; State; Zip Code 1503 Marshall LN Austin, TX 78703	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 05/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Doug <hr/> Contributor address; City; State; Zip Code 510 Upson ST Austin , TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) Austin Consulting Petroleum Engineers
Date 04/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Doug <hr/> Contributor address; City; State; Zip Code 510 Upson ST Austin , TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consulting Engineer		Employer (See Instructions) Austin Consulting Petroleum Engineers
Date 05/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Marshall Heath <hr/> Contributor address; City; State; Zip Code 7117 Wood Hollow DR Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Ops Director		Employer (See Instructions) Dell
Date 05/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Noel <hr/> Contributor address; City; State; Zip Code 10904 Yorktown TR Austin , TX 78726	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) Travis County

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/107 Rpt: 49/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/02/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Tammy B. <hr/> 6 Contributor address; City; State; Zip Code 10123 Dianella LN Austin, TX 78759	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 06/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Tammy B. <hr/> Contributor address; City; State; Zip Code 10123 Dianella LN Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 02/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson Jr., William C. <hr/> Contributor address; City; State; Zip Code 10123 Dianella LN Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 06/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson Jr., William C. <hr/> Contributor address; City; State; Zip Code 10123 Dianella LN Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 06/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston , G.J. <hr/> Contributor address; City; State; Zip Code 3018 Edgewater DR Austin , TX 78733	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Commercial Real Estate		Employer (See Instructions) Cushman & Wakefield

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/107 Rpt: 50/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/19/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnstone, Mr. & Mrs. J.H. <hr/> 6 Contributor address; City; State; Zip Code 4007 Bunny Run Austin , TX 78746	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 06/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones , Andrew <hr/> Contributor address; City; State; Zip Code 3105 Pearce RD Austin , TX 78730	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones , David <hr/> Contributor address; City; State; Zip Code 2309-B Westlake Dr. Austin , TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones IV, Will C. <hr/> Contributor address; City; State; Zip Code 3724 Jefferson ST Austin , TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Jones Law Firm
Date 05/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph , Joe <hr/> Contributor address; City; State; Zip Code 13600 Caldwell DR Austin , TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/107 Rpt: 51/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/20/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahle , David <hr/> 6 Contributor address; City; State; Zip Code 8213 Phantom Canyon DR Austin , TX 78726	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 04/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaiwi, Susan W. <hr/> Contributor address; City; State; Zip Code 4103 Circletree Loop Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Steve <hr/> Contributor address; City; State; Zip Code 9226 Knoll Crest Loop Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Arganteal
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Sherry <hr/> Contributor address; City; State; Zip Code 7408 Turnbuoy DR Austin , TX 78730	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Tim <hr/> Contributor address; City; State; Zip Code 7408 Turnbuoy DR Austin , TX 78730	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Auto Financial Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/107 Rpt: 52/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/25/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelm, Bill <hr/> 6 Contributor address; City; State; Zip Code 6205 Spicebrush CV Austin, TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Pickett, Kelm & Assoc., Inc.
Date 06/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenaston , Dale <hr/> Contributor address; City; State; Zip Code 6301 Senecio CV Austin , TX 78759	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Nvidia Corp.
Date 04/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kepler, Kristin <hr/> Contributor address; City; State; Zip Code 7001 Fireoak DR Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Mom		Employer (See Instructions) Self
Date 01/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kestranek, Gregg <hr/> Contributor address; City; State; Zip Code 7008 Fireoak DR Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Information Technology		Employer (See Instructions) US Federal Govenment
Date 01/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ketner , Teresa <hr/> Contributor address; City; State; Zip Code 5624 Taylorcrest DR Austin , TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) G&A Partners

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/107 Rpt: 53/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/10/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Key, Karl <hr/> 6 Contributor address; City; State; Zip Code 3201 Pecos ST Austin, TX 78703	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 05/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Key, Karl <hr/> Contributor address; City; State; Zip Code 3201 Pecos ST Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Key, Karl <hr/> Contributor address; City; State; Zip Code 3201 Pecos ST Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Key , Leslie <hr/> Contributor address; City; State; Zip Code 4601 Madrona DR Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Key , Leslie <hr/> Contributor address; City; State; Zip Code 4601 Madrona DR Austin, TX 78731	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/107 Rpt: 54/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/17/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirk, Betty J. <hr/> 6 Contributor address; City; State; Zip Code 7802 Heathercrest CIR Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 03/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein , Jeanne <hr/> Contributor address; City; State; Zip Code 1408 Rockcliff DR Austin , TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self Employed
Date 03/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein , Michael <hr/> Contributor address; City; State; Zip Code 1408 Rockcliff DR Austin , TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self Employed
Date 04/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kochwelp, Bill <hr/> Contributor address; City; State; Zip Code 10101 Eastman CV Austin , TX 78750	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Commercial Real Estate		Employer (See Instructions) Self
Date 04/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kocurek, Nancy <hr/> Contributor address; City; State; Zip Code 4010 Lewis LN Austin, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/107 Rpt: 55/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/30/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kozak, Jeanna <hr/> 6 Contributor address; City; State; Zip Code 4306 Bonnell Vista CV Austin , TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 03/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krause, Sheri <hr/> Contributor address; City; State; Zip Code 3605 Balcones DR Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krause, Winston <hr/> Contributor address; City; State; Zip Code 504 West 13th ST Austin, TX 78701	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 03/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kres, Mark <hr/> Contributor address; City; State; Zip Code 11708 Prairie Hen LN Austin, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 01/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuglen , Margaret <hr/> Contributor address; City; State; Zip Code 1310 Rockcliff RD Austin , TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/107 Rpt: 56/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/11/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuglen , Margaret <hr/> 6 Contributor address; City; State; Zip Code 1310 Rockcliff RD Austin , TX 78746	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 04/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kulp, Gary <hr/> Contributor address; City; State; Zip Code 8127 Mesa DR B206-148 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Self-Employed
Date 02/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey , Doug <hr/> Contributor address; City; State; Zip Code 2408 Dormarion LN Austin , TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lambert, Jennifer <hr/> Contributor address; City; State; Zip Code 1611 Manana ST Austin, TX 78730	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lambert, Michael <hr/> Contributor address; City; State; Zip Code 1611 Manana ST Austin, TX 78730	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/107 Rpt: 57/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 01/01/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landwermeier, John <hr/> 6 Contributor address; City; State; Zip Code 2504 Guara DR Cedar Park, TX 78613	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Arias & Associates, Inc.
Date 06/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lang, Thomas <hr/> Contributor address; City; State; Zip Code 8004 Asmara DR Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/06/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lang, Thomas <hr/> Contributor address; City; State; Zip Code 8004 Asmara DR Austin, TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Latto, Antonio <hr/> Contributor address; City; State; Zip Code 5011 Balcones DR Unit A Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Dell Technologies
Date 06/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LeTourneau, Robin <hr/> Contributor address; City; State; Zip Code 9310 Knoll Crest Loop Austin , TX 78759	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/107 Rpt: 58/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/25/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehmann , Craig <hr/> 6 Contributor address; City; State; Zip Code 8429 Asmara DR Austin , TX 78750	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 03/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levie, Jeanette <hr/> Contributor address; City; State; Zip Code 6329 Clarion DR Austin, TX 78749	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) ACFE
Date 05/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lifschitz , Elena <hr/> Contributor address; City; State; Zip Code 5908 Long CT Austin , TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lifschitz , Elena <hr/> Contributor address; City; State; Zip Code 5908 Long CT Austin , TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ligon, Kelly <hr/> Contributor address; City; State; Zip Code 11112 Aerie CV Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/107 Rpt: 59/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Christian <hr/> 6 Contributor address; City; State; Zip Code 8705 Oakmountain CIR Austin, TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Real Estate Broker		9 Employer (See Instructions) Self-Employed
Date 05/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lott, Carla <hr/> Contributor address; City; State; Zip Code 3901 Petra Path Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 06/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lott, Justin <hr/> Contributor address; City; State; Zip Code 1305 Karen AVE Austin, TX 78757	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) General Contractor		Employer (See Instructions) Lott Brothers Construction Co.
Date 04/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lott, Wayne <hr/> Contributor address; City; State; Zip Code 3901 Petra Path Austin, TX 78731	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Lott Brothers Construction Company
Date 06/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lundquist, Dan <hr/> Contributor address; City; State; Zip Code 6705 Mesa DR Austin, TX 78731	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Lonestar Truck Group

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/107 Rpt: 60/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/12/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyke , Tim <hr/> 6 Contributor address; City; State; Zip Code 5909 Taylorcrest DR Austin , TX 78749	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 06/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDonald, Roderick <hr/> Contributor address; City; State; Zip Code 4404 Small DR Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madrigal, JC <hr/> Contributor address; City; State; Zip Code 8105 Asherton Cove Austin, TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Dell Technologies
Date 03/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mandell, Humboldt C. <hr/> Contributor address; City; State; Zip Code 8807 Spicebrush DR Austin , TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Sidney <hr/> Contributor address; City; State; Zip Code 6009 Tributary Ridge DR Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Qualcomm

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/107 Rpt: 61/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/22/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Vincent <hr/> 6 Contributor address; City; State; Zip Code 4704 Hawkhaven LN Austin, TX 78727	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Phoenix American
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Vincent <hr/> Contributor address; City; State; Zip Code 4704 Hawkhaven LN Austin, TX 78727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) NA
Date 02/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markland, Scott <hr/> Contributor address; City; State; Zip Code 8031 Bottlebrush DR Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) RateGenius
Date 01/06/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marquardt M.D., Shelby <hr/> Contributor address; City; State; Zip Code 8140 N. MoPac Expwy Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Austin Anesthesiology Group, LLP
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Garrett <hr/> Contributor address; City; State; Zip Code 3541 Lost Creek BLVD Austin, TX 78735	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Milestone

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/107 Rpt: 62/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/03/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Paul T. <hr/> 6 Contributor address; City; State; Zip Code 4301 City Park RD Austin, TX 78730	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Government Relations		9 Employer (See Instructions) Reinsurance Assn. of America
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Clifford <hr/> Contributor address; City; State; Zip Code 10115 Dobbin DR Austin, TX 78748	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Florist		Employer (See Instructions) Self
Date 06/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez , Tonya <hr/> Contributor address; City; State; Zip Code 6004 Sierra Arbor CT Austin , TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State Farm Insurance
Date 04/16/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason , Mel <hr/> Contributor address; City; State; Zip Code 4526 Highland Terrace Austin , TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Builder		Employer (See Instructions) Self
Date 04/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason , Mel <hr/> Contributor address; City; State; Zip Code 4526 Highland Terrace Austin , TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Builder		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/107 Rpt: 63/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/24/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason , Mel <hr/> 6 Contributor address; City; State; Zip Code 4526 Highland Terrace Austin , TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Builder		9 Employer (See Instructions) Self
Date 05/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mast, Thomas <hr/> Contributor address; City; State; Zip Code 5714 Painted Valley Drive Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Patricia <hr/> Contributor address; City; State; Zip Code 5406 Alexis Cove Austin , TX 78741	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Program Specialist		Employer (See Instructions) OAG
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Steve <hr/> Contributor address; City; State; Zip Code 3003-A West 35th ST Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Steve T. Matthews Company
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayes, John <hr/> Contributor address; City; State; Zip Code 2908 Meandering River CT Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Investment Mgmt.		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/107 Rpt: 64/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/30/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayes, Stacey <hr/> 6 Contributor address; City; State; Zip Code 2908 Meandering River CT Austin, TX 78746	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Therapist		9 Employer (See Instructions) Self
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Robert <hr/> Contributor address; City; State; Zip Code 11309 Pickfair DR Austin, TX 78750	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) DQ
Date 04/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazurek , Eddie <hr/> Contributor address; City; State; Zip Code 6108 Abilene TR Austin , TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Sales		Employer (See Instructions) Knights of Columbus
Date 06/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazurek , Mary <hr/> Contributor address; City; State; Zip Code 6108 Abilene TR Austin , TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 05/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBride , Earle <hr/> Contributor address; City; State; Zip Code 4100 Jackson AVE Austin , TX 78731	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/107 Rpt: 65/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/30/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClure, Nick <hr/> 6 Contributor address; City; State; Zip Code 1202 N. Weston Austin , TX 78733	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Business Development		9 Employer (See Instructions) Self
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElhenny, Alisa <hr/> Contributor address; City; State; Zip Code 12025 Buckner RD Austin , TX 78726	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self-Employed Sales		Employer (See Instructions) Right ARM Merchant Services
Date 05/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKay, Tom <hr/> Contributor address; City; State; Zip Code 11339 Taylor Draper LN Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self
Date 05/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillian, Becky <hr/> Contributor address; City; State; Zip Code 6906 Dogwood Hollow Austin, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) 512 Boutique Events
Date 04/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillian, Becky <hr/> Contributor address; City; State; Zip Code 6906 Dogwood Hollow Austin, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) 512 Boutique Events

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/107 Rpt: 66/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/08/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillian, Becky <hr/> 6 Contributor address; City; State; Zip Code 6906 Dogwood Hollow Austin, TX 78750	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) 512 Boutique Events
Date 02/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillian, Becky <hr/> Contributor address; City; State; Zip Code 6906 Dogwood Hollow Austin, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) 512 Boutique Events
Date 01/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillian, Becky <hr/> Contributor address; City; State; Zip Code 6906 Dogwood Hollow Austin, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) 512 Boutique Events
Date 05/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillian , Gary <hr/> Contributor address; City; State; Zip Code 7603 Midpark CT Austin , TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Crossfield Technology
Date 06/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeil, Ryan <hr/> Contributor address; City; State; Zip Code 248 Sand Hill LN Austin , TX 78737	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/107 Rpt: 67/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/07/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McWilliams , Mandy Jaye <hr/> 6 Contributor address; City; State; Zip Code 7701 Valburn DR Austin , TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Interior Designer		9 Employer (See Instructions) Self
Date 06/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mealey, Bruce <hr/> Contributor address; City; State; Zip Code 3914 Amy CIR Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/18/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina , James R. <hr/> Contributor address; City; State; Zip Code 1007 Emerald Wood DR Austin , TX 78745	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Research Admin.		Employer (See Instructions) UT Austin
Date 06/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merritt, Cyrus <hr/> Contributor address; City; State; Zip Code 2804 Taku RD Cedar Park , TX 78613	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) AFD
Date 04/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metzger, Erika <hr/> Contributor address; City; State; Zip Code 6701 Rialto Blvd Austin, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Liquidity Services Inc

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/107 Rpt: 68/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/17/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metzger, Erika <hr/> 6 Contributor address; City; State; Zip Code 6701 Rialto Blvd Austin, TX 78735	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) Liquidity Services Inc
Date 04/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer , Geoffrey <hr/> Contributor address; City; State; Zip Code 5305 Hanging Cliff CV Austin , TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Joshua <hr/> Contributor address; City; State; Zip Code 1705 W. 32nd ST Austin , TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Construction Project Mgr.		Employer (See Instructions) Harvey Cleary
Date 06/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller , Kenneth <hr/> Contributor address; City; State; Zip Code 7606 Stoneywood DR Austin , TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 02/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Karen M. <hr/> Contributor address; City; State; Zip Code 11716 Drayton DR Austin, TX 78758	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/107 Rpt: 69/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/20/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills Jr., Roy L. <hr/> 6 Contributor address; City; State; Zip Code 11716 Drayton DR Austin, TX 78758	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 04/16/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minner , Jeff <hr/> Contributor address; City; State; Zip Code 229 1st Street NE Carmel , IN 46032	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Manufacturing Rep.		Employer (See Instructions) REPtronics Midwest
Date 06/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moazami , Amir <hr/> Contributor address; City; State; Zip Code 5814 Trailridge DR Austin , TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-Employed
Date 06/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moazami , Carmen <hr/> Contributor address; City; State; Zip Code 5814 Trailridge DR Austin , TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Wife		Employer (See Instructions) Self
Date 05/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monico , Jacob <hr/> Contributor address; City; State; Zip Code 1957 Alamo LN Santa Rosa , CA 95407	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Library Asst.		Employer (See Instructions) Santa Rosa Junior College

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/107 Rpt: 70/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/06/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monico , Jacob <hr/> 6 Contributor address; City; State; Zip Code 1957 Alamo LN Santa Rosa , CA 95407	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Library Asst.		9 Employer (See Instructions) Santa Rosa Junior College
Date 06/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montalvo, Elena <hr/> Contributor address; City; State; Zip Code 2323 Farnswood CIR Austin , TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore , Ann <hr/> Contributor address; City; State; Zip Code 4618 Gillis ST Austin , TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moorhead , Jordan <hr/> Contributor address; City; State; Zip Code 109 Meteor DR Unit A Austin , TX 78745	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) The Moorhead Team
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) More , Janette <hr/> Contributor address; City; State; Zip Code 6308 Shadow Mountain DR Austin , TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/107 Rpt: 71/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/20/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morfín , Terri <hr/> 6 Contributor address; City; State; Zip Code 12318 Double Tree LN Austin , TX 78750	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Operations Mgr.		9 Employer (See Instructions) Elevation
Date 06/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Jana <hr/> Contributor address; City; State; Zip Code 4300 Edgemont DR Austin, TX 78731	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 02/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosier , Adam <hr/> Contributor address; City; State; Zip Code 214 Barton Springs RD Austin , TX 78704	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Builder		Employer (See Instructions) Mosier Luxury Homes LLC
Date 06/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulconrey , Linda M. <hr/> Contributor address; City; State; Zip Code 6315 Big Cat CV Austin , TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, Amanda <hr/> Contributor address; City; State; Zip Code 3505 Mount Bonnell RD Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/107 Rpt: 72/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 01/06/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naiser , Jerry <hr/> 6 Contributor address; City; State; Zip Code 7103 Montana Norte Austin , TX 78731	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Real Green Pest & Lawn
Date 04/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nalle, William <hr/> Contributor address; City; State; Zip Code 4615 Bunny Run RD Austin , TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) ARE
Date 04/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash III, John H. <hr/> Contributor address; City; State; Zip Code 5818 Trailridge DR Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Ellis & Salazar
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naylor , Rick <hr/> Contributor address; City; State; Zip Code 12020 Mira Vista Way Austin , TX 78726	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Founder & CEO		Employer (See Instructions) PACT
Date 04/16/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, Glenn <hr/> Contributor address; City; State; Zip Code 1600 Barton Springs Rd Unit 1404 Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/107 Rpt: 73/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, Glenn <hr/> 6 Contributor address; City; State; Zip Code 1600 Barton Springs RD Unit 1404 Austin, TX 78704	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 04/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neillie, Lynn <hr/> Contributor address; City; State; Zip Code 10900 Research BLVD Ste. C160-9 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 06/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neillie, Lynn <hr/> Contributor address; City; State; Zip Code 3103 Bonnie RD Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 04/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nixon , Georgia <hr/> Contributor address; City; State; Zip Code 12907 Meehan DR Austin, TX 78727	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Esthetician		Employer (See Instructions) Self
Date 05/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman , Dedee <hr/> Contributor address; City; State; Zip Code 3917 Myrick DR Austin , TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/107 Rpt: 74/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/10/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nossov , Glenn <hr/> 6 Contributor address; City; State; Zip Code 11412 Barrington Way Austin , TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 06/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Brien, Mike <hr/> Contributor address; City; State; Zip Code 4705 Interlachen LN Austin, TX 78747	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ochoa , Rosemarie <hr/> Contributor address; City; State; Zip Code 11509 Highview DR Austin , TX 78750	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Radiology Technician		Employer (See Instructions) St. David's
Date 06/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliphint , Gean <hr/> Contributor address; City; State; Zip Code 8503 Appalachian DR Austin , TX 78759	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliver , Russell <hr/> Contributor address; City; State; Zip Code 2204 Robinhood TR Austin , TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/107 Rpt: 75/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/14/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Mark <hr/> 6 Contributor address; City; State; Zip Code 7005 Daugherty ST Austin , TX 78757	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Financial Planner		9 Employer (See Instructions) Horizon Wealth Strategies, LLC
Date 06/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Wade <hr/> Contributor address; City; State; Zip Code 7200 Montana Norte Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance agent		Employer (See Instructions) Self
Date 06/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Donald (Dr.) <hr/> Contributor address; City; State; Zip Code 3706 Greystone DR Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Retired
Date 03/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Roy <hr/> Contributor address; City; State; Zip Code 7206 Waterline RD Austin , TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Services Director		Employer (See Instructions) Dell
Date 03/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patten, Buddy M. <hr/> Contributor address; City; State; Zip Code 210 Lavaca ST Austin, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Intellimark Assoc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/107 Rpt: 76/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/10/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Gary <hr/> 6 Contributor address; City; State; Zip Code 5400 Montview ST Austin, TX 78756	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Enviroplan Architects
Date 04/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearce, Stephen <hr/> Contributor address; City; State; Zip Code 400 Lake Cliff TRL Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Ascension Orthopedics
Date 03/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearce, Stephen <hr/> Contributor address; City; State; Zip Code 400 Lake Cliff TRL Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Ascension Orthopedics
Date 04/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Brett <hr/> Contributor address; City; State; Zip Code 1440 Patterson RD Austin , TX 78733	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Ventex Corp.
Date 04/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson , Samantha <hr/> Contributor address; City; State; Zip Code 1440 Patterson RD Austin , TX 78733	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/107 Rpt: 77/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/10/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena , Julie <hr/> 6 Contributor address; City; State; Zip Code 12300 Lostwood CIR Austin , TX 78748	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Sales Director		9 Employer (See Instructions) Principal
Date 04/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena , Julie <hr/> Contributor address; City; State; Zip Code 12300 Lostwood CIR Austin , TX 78748	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales Director		Employer (See Instructions) Principal
Date 04/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez , Elaine <hr/> Contributor address; City; State; Zip Code 5905 Rain Creek PKWY Austin , TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pharr, Tami <hr/> Contributor address; City; State; Zip Code 124 Covington CV Georgetown, TX 78628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Travel Manager		Employer (See Instructions) Zillow
Date 04/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pisano, Pie <hr/> Contributor address; City; State; Zip Code 240 Bushnell AVE San Antonio, TX 78212	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Fitness		Employer (See Instructions) YMCA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/107 Rpt: 78/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/13/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitts, Andy <hr/> 6 Contributor address; City; State; Zip Code 1754 Bagdad RD Bldg 100A Cedar Park, TX 78613	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Titanium Payments
Date 04/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitts , Jeffrey <hr/> Contributor address; City; State; Zip Code 6101 Chestnut Hollow Austin , TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Semperis
Date 03/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell , Jennifer <hr/> Contributor address; City; State; Zip Code 1810 Rockcliff RD Austin , TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) NA
Date 06/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prevratil, Joseph <hr/> Contributor address; City; State; Zip Code 11902 Buckingham RD Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Security Analyst		Employer (See Instructions) State of Texas
Date 04/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price , Matt <hr/> Contributor address; City; State; Zip Code 3810 Green Trails N Austin , TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) QSSM

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/107 Rpt: 79/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/30/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prideaux, Brannin <hr/> 6 Contributor address; City; State; Zip Code 4106 Honeycomb Rock CIR Austin, TX 78731	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self-Employed
Date 04/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prideaux, Nancy <hr/> Contributor address; City; State; Zip Code 4106 Honeycomb Rock CIR Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Putnam , Joel <hr/> Contributor address; City; State; Zip Code 14312 Ballycastle TRL Austin , TX 78717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quaid, Buddy <hr/> Contributor address; City; State; Zip Code 2317 Bowman AVE Austin, TX 78703	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 02/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quaid, Buddy <hr/> Contributor address; City; State; Zip Code 2317 Bowman AVE Austin, TX 78703	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/107 Rpt: 80/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 01/11/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quaid, Buddy <hr/> 6 Contributor address; City; State; Zip Code 2317 Bowman AVE Austin, TX 78703	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Self
Date 06/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quick , Jerry <hr/> Contributor address; City; State; Zip Code 1007 W. 9th ST Austin , TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Commercial Real Estate		Employer (See Instructions) Quick & Company
Date 03/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Railey, James <hr/> Contributor address; City; State; Zip Code 10050 Great Hills TRL Austin , TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/16/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rasco , Martha <hr/> Contributor address; City; State; Zip Code 6503 Twin Creek Hollow Austin , TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rayburn , Bob <hr/> Contributor address; City; State; Zip Code 3667 Stoneridge RD Austin , TX 78746	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/107 Rpt: 81/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/05/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Jerry R. <hr/> 6 Contributor address; City; State; Zip Code 5100 Hwy. 290 West Bldg. 2, Suite 200 Austin, TX 78735	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) Development 2000, Inc.
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renard, Kenneth <hr/> Contributor address; City; State; Zip Code 8109 Flashpan Cove Austin , TX 78729	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Captain		Employer (See Instructions) COA EMS
Date 04/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice , Robert M. <hr/> Contributor address; City; State; Zip Code 54 Rainey ST Unit 1004 Austin , TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self
Date 06/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Carolyn <hr/> Contributor address; City; State; Zip Code 4104 Narrow Ridge DR Austin, TX 78730	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Charles <hr/> Contributor address; City; State; Zip Code 4104 Narrow Ridge DR Austin, TX 78730	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/107 Rpt: 82/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/20/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberson, Jay A. <hr/> 6 Contributor address; City; State; Zip Code 9001 Comburg DR Austin, TX 78748	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 03/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberson, Rosana <hr/> Contributor address; City; State; Zip Code 9001 Comburg DR Austin, TX 78748	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 04/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, John "Oscar" <hr/> Contributor address; City; State; Zip Code 1408 Wathen AVE Austin , TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Austin White Lime Co. / Robinson Ranch
Date 06/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Rebecca <hr/> Contributor address; City; State; Zip Code 3104 Stoneway DR Austin , TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/16/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez , Trudy <hr/> Contributor address; City; State; Zip Code 1900 Westridge DR Austin , TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/107 Rpt: 83/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/22/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronn, Ehud I. <hr/> 6 Contributor address; City; State; Zip Code 6508 Ladera Norte Austin, TX 78731	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Professor of Finance		9 Employer (See Instructions) University of Texas at Austin
Date 01/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roueché, John E. (Dr.) <hr/> Contributor address; City; State; Zip Code 4700 Lookout Mountain CV Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Retired
Date 04/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rouse , Roy <hr/> Contributor address; City; State; Zip Code 7920 Rockwood LN Austin , TX 78757	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Runde , Richard R. <hr/> Contributor address; City; State; Zip Code 1224 Havre Lafitte DR Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 05/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruple, Ronald <hr/> Contributor address; City; State; Zip Code 11301 Pickfair DR Austin , TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/107 Rpt: 84/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruppersburg, Kelly <hr/> 6 Contributor address; City; State; Zip Code 5515 Burgundy DR Austin , TX 78724	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Account Executive		9 Employer (See Instructions) Yardi
Date 01/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Susan Combs <hr/> Contributor address; City; State; Zip Code 10601 Floral Park DR Austin, TX 78759	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 06/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russo, Tony <hr/> Contributor address; City; State; Zip Code 2401 West Pecan ST Pflugerville, TX 78660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed
Date 01/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutledge, Elizabeth W. (Dr.) <hr/> Contributor address; City; State; Zip Code 6508 West Courtyard DR Austin, TX 78730	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruwwwe, John <hr/> Contributor address; City; State; Zip Code 6205 Edwards Mountain CV Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Oil & Gas Geologist		Employer (See Instructions) Self-Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/107 Rpt: 85/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/09/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryder, Peggy <hr/> 6 Contributor address; City; State; Zip Code 2805 Robbs Run Austin, TX 78703	7 Amount of Contribution (\$) <div style="text-align: right;">\$10.00</div>
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 05/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryder, Peggy <hr/> Contributor address; City; State; Zip Code 2805 Robbs Run Austin, TX 78703	Amount of Contribution (\$) <div style="text-align: right;">\$10.00</div>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryder, Peggy <hr/> Contributor address; City; State; Zip Code 2805 Robbs Run Austin, TX 78703	Amount of Contribution (\$) <div style="text-align: right;">\$10.00</div>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryder, Peggy <hr/> Contributor address; City; State; Zip Code 2805 Robbs Run Austin, TX 78703	Amount of Contribution (\$) <div style="text-align: right;">\$10.00</div>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 02/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryder, Peggy <hr/> Contributor address; City; State; Zip Code 2805 Robbs Run Austin, TX 78703	Amount of Contribution (\$) <div style="text-align: right;">\$10.00</div>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/107 Rpt: 86/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 01/09/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryder, Peggy <hr/> 6 Contributor address; City; State; Zip Code 2805 Robbs Run Austin, TX 78703	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 05/06/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sack, Les <hr/> Contributor address; City; State; Zip Code 5404 Western Hills DR Austin , TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sadler , Kelly <hr/> Contributor address; City; State; Zip Code 507 Upson ST Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Government Relations		Employer (See Instructions) ICC
Date 06/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sager, Alan <hr/> Contributor address; City; State; Zip Code 8108 Mesa DR Suite 100 Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions) Self
Date 06/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sager, Susan <hr/> Contributor address; City; State; Zip Code 4205 Greystone DR Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Pastoral Care		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/107 Rpt: 87/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 01/31/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sammis, Margaret <hr/> 6 Contributor address; City; State; Zip Code P. O. Box 81701 Austin, TX 78708	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 01/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sammis, Tiffany <hr/> Contributor address; City; State; Zip Code P. O. Box 81701 Austin, TX 78708	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 03/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanderson, Graham <hr/> Contributor address; City; State; Zip Code 3704 Weatherhill CV Austin, TX 78730	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software Dev.		Employer (See Instructions) Vast
Date 06/16/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanderson, Graham <hr/> Contributor address; City; State; Zip Code 3704 Weatherhill CV Austin, TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Software Dev.		Employer (See Instructions) Vast
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanderson, Graham <hr/> Contributor address; City; State; Zip Code 3704 Weatherhill CV Austin, TX 78730	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software Dev.		Employer (See Instructions) Vast

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/107 Rpt: 88/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/30/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandlin, Matthew <hr/> 6 Contributor address; City; State; Zip Code 23 Scott Cres Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Real Estate Developer		9 Employer (See Instructions) Azalea Development, LLC
Date 01/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarvis, Larry <hr/> Contributor address; City; State; Zip Code 11901 Swearingen Dr #42 Austin, TX 78758	Amount of Contribution (\$) \$99.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Satsky , Mark <hr/> Contributor address; City; State; Zip Code 6605 Zequiel DR Austin , TX 78744	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sault-Eli, Kristi <hr/> Contributor address; City; State; Zip Code 11808 Charing Cross RD Austin , TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Mortician		Employer (See Instructions) All Souls Cemetery
Date 06/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sault-Eli, Kristi <hr/> Contributor address; City; State; Zip Code 11808 Charing Cross RD Austin , TX 78759	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Mortician		Employer (See Instructions) All Souls Cemetery

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/107 Rpt: 89/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/13/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaffner, Tim <hr/> 6 Contributor address; City; State; Zip Code 2602 Top Cove Austin, TX 78704	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 04/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheider , Carolyn <hr/> Contributor address; City; State; Zip Code 8811 Westerkirk DR Austin , TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, William E. <hr/> Contributor address; City; State; Zip Code 8417 Adirondack TRL Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schomburg, Faye <hr/> Contributor address; City; State; Zip Code 3009 Edgewater DR Austin , TX 78733	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 01/03/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwant, Neil <hr/> Contributor address; City; State; Zip Code 5308 Dry Wells RD Austin, TX 78749	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/107 Rpt: 90/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/20/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, Diane <hr/> 6 Contributor address; City; State; Zip Code 1002 Audrey CT Austin , TX 78704	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 05/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartzman , Steven <hr/> Contributor address; City; State; Zip Code 10702 Bull Ridge DR Austin , TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/18/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartzman , Steven <hr/> Contributor address; City; State; Zip Code 10702 Bull Ridge DR Austin , TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scotty , Christopher D. <hr/> Contributor address; City; State; Zip Code 9002 Wildridge DR Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sepehri, John <hr/> Contributor address; City; State; Zip Code 5817 Mount Bonnell RD Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Foley & Lardner LLP

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/107 Rpt: 91/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/23/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sevilla, Nohemi <hr/> 6 Contributor address; City; State; Zip Code 9901 Parkfield DR Austin , TX 78758	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) NA
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shea, William <hr/> Contributor address; City; State; Zip Code P.O. Box 1376 Austin , TX 78767	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Maggie Mae's
Date 06/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinclair, Vallarie <hr/> Contributor address; City; State; Zip Code 7901 Ceberry DR Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Legal Ops		Employer (See Instructions) Dell
Date 03/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singletary, Charles <hr/> Contributor address; City; State; Zip Code 4913 Westview DR Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate Finance		Employer (See Instructions) Self-Employed
Date 05/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skowbo, James <hr/> Contributor address; City; State; Zip Code 310 Mustang Way Georgetown, TX 78633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/107 Rpt: 92/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/21/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skowbo, James <hr/> 6 Contributor address; City; State; Zip Code 310 Mustang Way Georgetown, TX 78633	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self-Employed
Date 06/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skowbo, James <hr/> Contributor address; City; State; Zip Code 310 Mustang Way Georgetown, TX 78633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith , Anna Zetchus <hr/> Contributor address; City; State; Zip Code 5019 W. Frances PL Austin , TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Filmmaker/writer		Employer (See Instructions) Self
Date 06/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Mimi <hr/> Contributor address; City; State; Zip Code 1404 Kent LN Austin , TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Richard <hr/> Contributor address; City; State; Zip Code 4010 Austin Woods DR Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/107 Rpt: 93/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/12/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, William <hr/> 6 Contributor address; City; State; Zip Code 8141 Jester BLVD Austin, TX 78750	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 04/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solin , David <hr/> Contributor address; City; State; Zip Code 3102 Foxfire DR Austin , TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Software Architect		Employer (See Instructions) Arctic Wolf Networks
Date 04/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soltau , Douglas <hr/> Contributor address; City; State; Zip Code 1718 Kimmerling LN Austin , TX 78758	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorrentino , Nick <hr/> Contributor address; City; State; Zip Code 637 Sierra Mar Loop Leander , TX 78641	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Tidal Consulting
Date 05/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spohn, Darren <hr/> Contributor address; City; State; Zip Code 9605 Corbe Drive Austin, TX 78726	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Spohn & Associates, Inc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/107 Rpt: 94/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/20/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Jonathon & Kendra <hr/> 6 Contributor address; City; State; Zip Code 4712 Paraiso PKWY Austin, TX 78738	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sticklen , Mike <hr/> Contributor address; City; State; Zip Code 7419 Whistlestop DR Austin , TX 78749	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) IT Analyst		Employer (See Instructions) COA / APH
Date 04/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stilley , Jonathan <hr/> Contributor address; City; State; Zip Code 5016 Dull Knife DR Austin , TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 06/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stilley , Patricia <hr/> Contributor address; City; State; Zip Code 5016 Dull Knife DR Austin , TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Jonathan Stilley Real Estate
Date 06/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strickland , Carol <hr/> Contributor address; City; State; Zip Code 8610 Winding Walk Austin , TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Kuper Sothebys Realty

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/107 Rpt: 95/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuber, Alan <hr/> 6 Contributor address; City; State; Zip Code 6703 Colina LN Austin, TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 04/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swail, Brad <hr/> Contributor address; City; State; Zip Code 1511 Wilson Heights DR Austin, TX 78746	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Podcaster		Employer (See Instructions) Self
Date 01/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tavarez, Robert <hr/> Contributor address; City; State; Zip Code 15008 Solera Dr Austin, TX 78717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Caliber Holdings
Date 06/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Maez <hr/> Contributor address; City; State; Zip Code 6235 Aviara DR Austin , TX 78735	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) IBM
Date 06/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor , Mary <hr/> Contributor address; City; State; Zip Code 4109 Paint Rock DR Austin , TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Member		Employer (See Instructions) TARB

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/107 Rpt: 96/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/24/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor , William D. <hr/> 6 Contributor address; City; State; Zip Code 4807 Palisade DR Austin , TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 04/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor , Yvonne C.D. <hr/> Contributor address; City; State; Zip Code 4807 Palisade DR Austin , TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teeler, Cliff <hr/> Contributor address; City; State; Zip Code 6009 Sierra Arbor Ct Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Strategic Account Manager		Employer (See Instructions) Sendbird
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templeton, James <hr/> Contributor address; City; State; Zip Code 8000 Havenwood DR Austin , TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templeton, Jim <hr/> Contributor address; City; State; Zip Code 7202 Spurlock DR Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/107 Rpt: 97/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/17/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templeton, Laura <hr/> 6 Contributor address; City; State; Zip Code 5802 Lookout Mountain DR Austin, TX 78731	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Commissioner		9 Employer (See Instructions) Self-Employed
Date 05/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ternus , Joydene <hr/> Contributor address; City; State; Zip Code 8713 Silverhill LN Austin , TX 78759	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ternus , Joydene <hr/> Contributor address; City; State; Zip Code 8713 Silverhill LN Austin , TX 78759	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thepsoumane , Tooney <hr/> Contributor address; City; State; Zip Code 4808 Hale DR Austin , TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Commercial Lender		Employer (See Instructions) First Commonwealth Bank
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, D. J. <hr/> Contributor address; City; State; Zip Code 5500 Rain Creek PKWY Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/107 Rpt: 98/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 01/02/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, Matthew <hr/> 6 Contributor address; City; State; Zip Code 1412 W. 9th ST Austin, TX 78703	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self-Employed
Date 06/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, Matthew <hr/> Contributor address; City; State; Zip Code 1412 W. 9th ST Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-Employed
Date 03/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thornton , Roger <hr/> Contributor address; City; State; Zip Code 206 Sunrise Ridge CV Lakeway , TX 78738	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd , Kelli <hr/> Contributor address; City; State; Zip Code 816 Congress Suite 1500 Austin , TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Martens, Todd & Leonard
Date 04/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomko, Matthew <hr/> Contributor address; City; State; Zip Code 4501 Cross Valley Run Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Concerto Card Company

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/107 Rpt: 99/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/10/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trammell , Joel <hr/> 6 Contributor address; City; State; Zip Code 1620 Palomino Ridge DR Austin , TX 78733	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 06/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Travelstead , Becky <hr/> Contributor address; City; State; Zip Code 5727 N. Scout Island CIR Austin , TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/18/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troxell , Clay <hr/> Contributor address; City; State; Zip Code 4813 White Elm DR Austin , TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 01/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trull, Christine W. <hr/> Contributor address; City; State; Zip Code 3704 Eastledge Dr. Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 01/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trull, R. Scott <hr/> Contributor address; City; State; Zip Code 3704 Eastledge Dr. Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/107 Rpt: 100/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/30/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trull, Robert <hr/> 6 Contributor address; City; State; Zip Code 3704 Eastledge DR Austin, TX 78731	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 05/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turnquist, Michele <hr/> Contributor address; City; State; Zip Code 2506 Sutherland ST Austin, TX 78746	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Engel & Volkers
Date 01/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tweedy M.D., Dennis <hr/> Contributor address; City; State; Zip Code 7713 Baja Cove Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ueckert, Jan <hr/> Contributor address; City; State; Zip Code 5406 N. Scout Island CIR Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urban, Tomislav <hr/> Contributor address; City; State; Zip Code 4505 Upvalley CT Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Computer Programmer		Employer (See Instructions) UT Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/107 Rpt: 101/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/15/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urban, Tomislav <hr/> 6 Contributor address; City; State; Zip Code 4505 Upvalley CT Austin, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Computer Programmer		9 Employer (See Instructions) UT Austin
Date 05/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vallandingham, Mike <hr/> Contributor address; City; State; Zip Code 202 Nueces ST Austin, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Funding Consultant		Employer (See Instructions) Wexum
Date 05/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Landuyt, Dean <hr/> Contributor address; City; State; Zip Code 502 Sunny LN Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 01/06/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Norman, Elaine <hr/> Contributor address; City; State; Zip Code 7305-B Bandera Ranch TRL Austin , TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 04/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Reet, Brian <hr/> Contributor address; City; State; Zip Code 1002 Payne AVE Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/107 Rpt: 102/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/17/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Reet, Brian <hr/> 6 Contributor address; City; State; Zip Code 1002 Payne AVE Austin, TX 78757	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Writer		9 Employer (See Instructions) Self
Date 01/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Sicklen, Pamela <hr/> Contributor address; City; State; Zip Code 10722 River Plantation DR Austin, TX 78747	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Safeway Certifications, LLC
Date 05/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDeWalle, Mike (Dr.) <hr/> Contributor address; City; State; Zip Code 6602 Three Oaks CIR Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vigue , Richard W. <hr/> Contributor address; City; State; Zip Code 11116 Blackmoor DR Austin , TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 04/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virun, William <hr/> Contributor address; City; State; Zip Code 10744 Bramblecrest DR Austin, TX 78726	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Self-Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/107 Rpt: 103/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/28/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Von Rosenberg , Robin <hr/> 6 Contributor address; City; State; Zip Code 10003 Talleyran DR Austin, TX 78750	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Votteler, Sharmon <hr/> Contributor address; City; State; Zip Code 10604 Natick LN Austin , TX 78739	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker , Donald <hr/> Contributor address; City; State; Zip Code 4408 Long Champ DR Austin , TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker , Kirby <hr/> Contributor address; City; State; Zip Code 7308 Navajo Pass Leander , TX 78641	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Hospitality		Employer (See Instructions) NIK'S Kitchen + Bar
Date 06/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker , Margaret <hr/> Contributor address; City; State; Zip Code 4408 Long Champ DR Austin , TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/107 Rpt: 104/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/26/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker , Roy <hr/> 6 Contributor address; City; State; Zip Code 10802 Catthorn CV Austin , TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 01/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Valerie <hr/> Contributor address; City; State; Zip Code 6027 Mount Bonnell CV Austin, TX 78731	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 06/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Charlotte <hr/> Contributor address; City; State; Zip Code 5405 Western Hills DR Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiner , Peter <hr/> Contributor address; City; State; Zip Code 70 Rainey ST Austin , TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 02/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Benjamin <hr/> Contributor address; City; State; Zip Code 5901 Saratoga CV Austin, TX 78746	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Management		Employer (See Instructions) UCS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/107 Rpt: 105/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/13/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welp, Mark <hr/> 6 Contributor address; City; State; Zip Code 7108 Barefoot CV Austin, TX 78730	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weyant, Perry <hr/> Contributor address; City; State; Zip Code 5714 Taylor Draper CV Austin , TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White , Dawn M. <hr/> Contributor address; City; State; Zip Code 2900 Sunridge DR Unit 212 Austin , TX 78741	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Aloha Dental
Date 03/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams , Sherran E. <hr/> Contributor address; City; State; Zip Code 8601 Donna Gail DR Austin , TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 03/18/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jim <hr/> Contributor address; City; State; Zip Code 11408 Ohmfield CT Austin , TX 78739	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/107 Rpt: 106/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/12/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson , Meg <hr/> 6 Contributor address; City; State; Zip Code 2005 Arthur LN Austin , TX 78704	7 Amount of Contribution (\$) \$20.22
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 04/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson , Meg <hr/> Contributor address; City; State; Zip Code 2005 Arthur LN Austin , TX 78704	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 03/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson , Meg <hr/> Contributor address; City; State; Zip Code 2005 Arthur LN Austin , TX 78704	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 02/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson , Meg <hr/> Contributor address; City; State; Zip Code 2005 Arthur LN Austin , TX 78704	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 01/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson , Meg <hr/> Contributor address; City; State; Zip Code 2005 Arthur LN Austin , TX 78704	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/107 Rpt: 107/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/12/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson , Meg <hr/> 6 Contributor address; City; State; Zip Code 2005 Arthur LN Austin , TX 78704	7 Amount of Contribution (\$) \$20.22
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 04/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> Contributor address; City; State; Zip Code 11742 D-K Ranch RD Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> Contributor address; City; State; Zip Code 11742 D-K Ranch RD Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winegar, Steven <hr/> Contributor address; City; State; Zip Code 4615 Crestway DR Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Terry McDaniel & Co.
Date 05/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wisdom , Greg <hr/> Contributor address; City; State; Zip Code 9417 Great Hills Trail Austin , TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Data Quality Assurance		Employer (See Instructions) Austin Board of Realtors

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/107 Rpt: 108/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/26/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wisthuff, Linda <hr/> 6 Contributor address; City; State; Zip Code 6801 Beckett RD Unit 111L Austin, TX 78749	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Real Estate Broker		9 Employer (See Instructions) Self-Employed
Date 04/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Withers , Will <hr/> Contributor address; City; State; Zip Code 3500 Laurel Ledge LN Austin , TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 02/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woltemath, Cynthia <hr/> Contributor address; City; State; Zip Code 2105 Kemper CV Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 02/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woltemath, Scott <hr/> Contributor address; City; State; Zip Code 2105 Kemper CV Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 06/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> Contributor address; City; State; Zip Code 5002 Sevan CV Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/107 Rpt: 109/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/10/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woody , Bob <hr/> 6 Contributor address; City; State; Zip Code 2204 Point Bluff DR Austin , TX 78746	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Self-Employed		9 Employer (See Instructions) Self-Employed
Date 03/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worsham , Bill <hr/> Contributor address; City; State; Zip Code 1105 Norwalk LN Austin , TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wu, Jizhi <hr/> Contributor address; City; State; Zip Code 9901 Patrice DR Austin , TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) GM
Date 05/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yacktman, Ellyn <hr/> Contributor address; City; State; Zip Code 3571 Far West Blvd Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Wife/mother		Employer (See Instructions) NA
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Ana <hr/> Contributor address; City; State; Zip Code 7525 Brecourt Manor Way Austin , TX 78739	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/107 Rpt: 110/163
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/12/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zoraster, Steven <hr/> 6 Contributor address; City; State; Zip Code 3329 Perry LN Austin, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/2 Rpt: 111/163	
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/01/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Ruth <hr/> 7 Contributor address; City; State; Zip Code 4900 Interlachen LN Austin , TX 78747	8 Amount of contribution (\$) \$266.00	9 In-kind contribution description Food, beverages and location for Meet and Greet. <hr/> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See instructions) NA	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Kendel <hr/> Contributor address; City; State; Zip Code 4301 City Park RD Austin, TX 78730	Amount of contribution (\$) \$400.00	In-kind contribution description Food, beverages and location for Meet and Greet. <hr/> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Accountant		Employer (FOR NON-JUDICIAL) (See instructions) Self	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 05/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillian, Becky <hr/> Contributor address; City; State; Zip Code 6906 Dogwood Hollow Austin, TX 78750	Amount of contribution (\$) \$225.00	In-kind contribution description Food, beverages and location for Meet and Greet. <hr/> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Owner		Employer (FOR NON-JUDICIAL) (See instructions) 512 Boutique Events	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/2 Rpt: 112/163	
2 FILER NAME Virden, Jennifer M		3 Filer ID (Ethics Commission Filers) 00090501	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/08/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jim & Mary	8 Amount of contribution (\$) \$250.00	9 In-kind contribution description Food, beverages and location for Meet and Greet.
7 Contributor address; City; State; Zip Code 11408 Ohmfield CT Austin , TX 78739		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Real Estate		11 Employer (FOR NON-JUDICIAL) (See instructions) Self	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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: 1/51 Rpt:	2 FILER NAME Virden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/16/2022	5 Payee name Adorama Inc.	
6 Amount (\$) \$169.37	7 Payee address; City; State; Zip Code 42 West 18th ST New York, NY 10011	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 A/V recording equipment.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/16/2022	Payee name Adorama Inc.	
Amount (\$) \$291.19	Payee address; City; State; Zip Code 42 West 18th ST New York, NY 10011	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 A/V recording equipment.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/07/2022	Payee name Amazon	
Amount (\$) \$8.00	Payee address; City; State; Zip Code 440 Terry AVE N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Paper Clips.
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: 2/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 01/07/2022	5 Payee name Amazon	
6 Amount (\$) \$4.18	7 Payee address; City; State; Zip Code 440 Terry AVE N Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Binder Clips.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/08/2022	Payee name Amazon	
Amount (\$) \$4.32	Payee address; City; State; Zip Code 440 Terry AVE N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Rubber Bands.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/09/2022	Payee name Amazon	
Amount (\$) \$7.56	Payee address; City; State; Zip Code 440 Terry AVE N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Binder Clips.
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: 3/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/12/2022	5 Payee name Amazon	
6 Amount (\$) \$154.68	7 Payee address; City; State; Zip Code 440 Terry AVE N Seattle, WA 98109	
8 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 Toner.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/07/2022	Payee name Amazon	
Amount (\$) \$12.98	Payee address; City; State; Zip Code 440 Terry AVE N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Envelopes.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/16/2022	Payee name Amazon	
Amount (\$) \$12.44	Payee address; City; State; Zip Code 440 Terry AVE N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Envelopes.
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: 4/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/25/2022	5 Payee name Amazon	
6 Amount (\$) \$29.22	7 Payee address; City; State; Zip Code 440 Terry AVE N Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Clipboards.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2022	Payee name Anedot, Inc.	
Amount (\$) \$3,101.53	Payee address; City; State; Zip Code 1340 Poydras ST Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction fees 1/1/22 - 6/30/22.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/22/2022	Payee name Angela Washburn, CPA	
Amount (\$) \$800.00	Payee address; City; State; Zip Code 1504 Leander RD Georgetown, TX 78628	
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 Preparation of IRS forms.
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: 5/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 01/22/2022	5 Payee name Angela Washburn, CPA	
6 Amount (\$) \$262.00	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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Preparation of IRS forms.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2022	Payee name Bennett, Larry	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 2624 Tom Miller ST Austin , TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Refund of check contributions.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/15/2022	Payee name Bowside Strategies	
Amount (\$) \$2,750.00	Payee address; City; State; Zip Code P.O. Box 10684 Austin , TX 78766	
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 Consulting.
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: 6/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/11/2022	5 Payee name Bowside Strategies	
6 Amount (\$) \$5,500.00	7 Payee address; City; State; Zip Code P.O. Box 10684 Austin , TX 78766	
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 Consulting.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/06/2022	Candidate/Officeholder name Payee name Bowside Strategies	
Amount (\$) \$5,500.00	Payee address; City; State; Zip Code P.O. Box 10684 Austin , TX 78766	
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 Consulting.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/03/2022	Candidate/Officeholder name Payee name Bowside Strategies	
Amount (\$) \$5,500.00	Payee address; City; State; Zip Code P.O. Box 10684 Austin , TX 78766	
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 Consulting.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/03/2022	Candidate/Officeholder name Payee name Bowside Strategies	
Amount (\$) \$5,500.00	Payee address; City; State; Zip Code P.O. Box 10684 Austin , TX 78766	
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 Consulting.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 7/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/30/2022	5 Payee name Bumpersticker.com	
6 Amount (\$) \$467.59	7 Payee address; City; State; Zip Code 612 W. 34th ST Austin, TX 78705	
8 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 Stickers.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/18/2022	Candidate/Officeholder name Office sought Office held	
Payee name Constant Contact		
Amount (\$) \$69.29	Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Email.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/22/2022	Candidate/Officeholder name Office sought Office held	
Payee name Constant Contact		
Amount (\$) \$69.29	Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Email.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 8/51 Rpt:	2 FILER NAME Virden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/23/2022	5 Payee name Constant Contact	
6 Amount (\$) \$133.25	7 Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Email.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/22/2022	Payee name Constant Contact	
Amount (\$) \$133.25	Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Email.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/22/2022	Payee name Constant Contact	
Amount (\$) \$133.25	Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Email.
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: 9/51 Rpt:	2 FILER NAME Virden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/22/2022	5 Payee name Constant Contact	
6 Amount (\$) \$133.25	7 Payee address; City; State; Zip Code 3675 Precision DR Loveland, CO 80538	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Email.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/06/2022	Payee name Etsy	
Amount (\$) \$28.10	Payee address; City; State; Zip Code 55 Washington ST Suite 512 Brooklyn, NY 11201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Stationery	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense "Thank You" cards.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/15/2022	Payee name Etsy	
Amount (\$) \$28.10	Payee address; City; State; Zip Code 55 Washington ST Suite 512 Brooklyn, NY 11201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Stationery	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense "Thank You" cards.
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: 10/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 01/26/2022	5 Payee name GoDaddy	
6 Amount (\$) \$68.67	7 Payee address; City; State; Zip Code 14455 N. Hayden RD Suite 219 Scottsdale, AZ 85260	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Internet/Email	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet/Email.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2022	Payee name Johnson, Catherine Matthews	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 1503 Marshall LN Austin , TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Refund of check contribution.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/04/2022	Payee name Lowe's	
Amount (\$) \$37.93	Payee address; City; State; Zip Code 8000 Shoal Creek BLVD Austin, TX 78757	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Wood, nails, & ties.
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: 11/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/23/2022	5 Payee name Meta Platforms, Inc. / Facebook	
6 Amount (\$) \$10.00	7 Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/24/2022	Candidate/Officeholder name Office sought Office held	
Payee name Meta Platforms, Inc. / Facebook		
Amount (\$) \$10.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/25/2022	Candidate/Officeholder name Office sought Office held	
Payee name Meta Platforms, Inc. / Facebook		
Amount (\$) \$10.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/25/2022	Candidate/Officeholder name Office sought Office held	
Payee name Meta Platforms, Inc. / Facebook		
Amount (\$) \$10.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 12/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/26/2022	5 Payee name Meta Platforms, Inc. / Facebook	
6 Amount (\$) \$10.00	7 Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/27/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/28/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
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: 13/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/03/2022	5 Payee name Meta Platforms, Inc. / Facebook	
6 Amount (\$) \$22.98	7 Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/03/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$35.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/05/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
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: 14/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/06/2022	5 Payee name Meta Platforms, Inc. / Facebook	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/08/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/10/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
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: 15/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/15/2022	5 Payee name Meta Platforms, Inc. / Facebook	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/19/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$25.47	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/24/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
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: 16/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/26/2022	5 Payee name Meta Platforms, Inc. / Facebook	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/28/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
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: 17/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/30/2022	5 Payee name Meta Platforms, Inc. / Facebook	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/19/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$31.51	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/21/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
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: 18/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/22/2022	5 Payee name Meta Platforms, Inc. / Facebook	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/22/2022	Candidate/Officeholder name	Office sought
Amount (\$) \$50.00	Payee name Meta Platforms, Inc. / Facebook	Office held
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/22/2022	Candidate/Officeholder name	Office sought
Amount (\$) \$50.00	Payee name Meta Platforms, Inc. / Facebook	Office held
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/22/2022	Candidate/Officeholder name	Office sought
Amount (\$) \$50.00	Payee name Meta Platforms, Inc. / Facebook	Office held
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 19/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/22/2022	5 Payee name Meta Platforms, Inc. / Facebook	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
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: 20/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/23/2022	5 Payee name Meta Platforms, Inc. / Facebook	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/24/2022	Candidate/Officeholder name Office sought Office held	
Payee name Meta Platforms, Inc. / Facebook		
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/24/2022	Candidate/Officeholder name Office sought Office held	
Payee name Meta Platforms, Inc. / Facebook		
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/24/2022	Candidate/Officeholder name Office sought Office held	
Payee name Meta Platforms, Inc. / Facebook		
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 21/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/24/2022	5 Payee name Meta Platforms, Inc. / Facebook	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
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: 22/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/25/2022	5 Payee name Meta Platforms, Inc. / Facebook	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/26/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/26/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/26/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
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: 23/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/26/2022	5 Payee name Meta Platforms, Inc. / Facebook	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/26/2022	Candidate/Officeholder name	Office sought
Office held		
Date 06/26/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/27/2022	Candidate/Officeholder name	Office sought
Office held		
Date 06/27/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/27/2022	Candidate/Officeholder name	Office sought
Office held		
Date 06/27/2022	Payee name Meta Platforms, Inc. / Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1 Facebook Way Menlo Park, CA 94025	
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 Social media.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 24/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/06/2022	5 Payee name Office Depot	
6 Amount (\$) \$93.84	7 Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Stationery & labels.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/14/2022	Payee name Office Depot	
Amount (\$) \$850.74	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Postage, stationery, etc.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/16/2022	Payee name Office Depot	
Amount (\$) \$128.47	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Toner and paper.
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: 25/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/17/2022	5 Payee name Office Depot	
6 Amount (\$) \$107.95	7 Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Stationery.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/23/2022	Payee name Office Depot	
Amount (\$) \$114.00	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
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 Toner.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/24/2022	Payee name Office Depot	
Amount (\$) \$71.96	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Stationery.
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: 26/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/01/2022	5 Payee name Office Depot	
6 Amount (\$) \$232.00	7 Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Postage.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/01/2022	Payee name Office Depot	
Amount (\$) \$75.04	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Stationery, envelopes, labels.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/01/2022	Payee name Office Depot	
Amount (\$) \$12.78	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Labels.
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: 27/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/19/2022	5 Payee name Office Depot	
6 Amount (\$) \$153.53	7 Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Postage, labels, "Thank You" notecards.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/30/2022	Payee name Office Depot	
Amount (\$) \$58.00	Payee address; City; State; Zip Code 4501 W. Braker LN Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Stationery.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/05/2022	Payee name Parsons, Bradley	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
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 Campaign assistant.
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: 28/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 01/19/2022	5 Payee name Parsons, Bradley	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
8 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 Campaign assistant.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2022	Payee name Parsons, Bradley	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
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 Campaign assistant.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/18/2022	Payee name Parsons, Bradley	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
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 Campaign assistant.
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: 29/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/10/2022	5 Payee name Parsons, Bradley	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
8 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 Campaign assistant.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/23/2022	Payee name Parsons, Bradley	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
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 Campaign assistant.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/05/2022	Payee name Parsons, Bradley	
Amount (\$) \$600.00	Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
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 Campaign assistant.
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: 30/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/12/2022	5 Payee name Parsons, Bradley	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
8 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 Campaign assistant.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/19/2022	Payee name Parsons, Bradley	
Amount (\$) \$600.00	Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
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 Campaign assistant.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/26/2022	Payee name Parsons, Bradley	
Amount (\$) \$573.00	Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
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 Campaign assistant.
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: 31/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/03/2022	5 Payee name Parsons, Bradley	
6 Amount (\$) \$520.00	7 Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
8 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 Campaign assistant.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/11/2022	Payee name Parsons, Bradley	
Amount (\$) \$540.00	Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
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 Campaign assistant.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/17/2022	Payee name Parsons, Bradley	
Amount (\$) \$555.00	Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
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 Campaign assistant.
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: 32/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/24/2022	5 Payee name Parsons, Bradley	
6 Amount (\$) \$546.00	7 Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
8 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 Campaign assistant.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2022	Payee name Parsons, Bradley	
Amount (\$) \$540.00	Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
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 Campaign assistant.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/08/2022	Payee name Parsons, Bradley	
Amount (\$) \$742.00	Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
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 Campaign assistant.
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: 33/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/15/2022	5 Payee name Parsons, Bradley	
6 Amount (\$) \$742.00	7 Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
8 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 Campaign assistant.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/22/2022	Payee name Parsons, Bradley	
Amount (\$) \$545.00	Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
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 Campaign assistant.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/01/2022	Payee name Patreon	
Amount (\$) \$5.41	Payee address; City; State; Zip Code 395 Page Mill RD Palo Alto, CA 94306	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brad Swail's "The Austin City Councilman" podcast.
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: 34/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/01/2022	5 Payee name Patreon	
6 Amount (\$) \$5.41	7 Payee address; City; State; Zip Code 395 Page Mill RD Palo Alto, CA 94306	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brad Swail's "The Austin City Councilman" podcast.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/01/2022	Payee name Patreon	
Amount (\$) \$5.41	Payee address; City; State; Zip Code 395 Page Mill RD Palo Alto, CA 94306	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brad Swail's "The Austin City Councilman" podcast.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/02/2022	Payee name Patreon	
Amount (\$) \$5.41	Payee address; City; State; Zip Code 395 Page Mill RD Palo Alto, CA 94306	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brad Swail's "The Austin City Councilman" podcast.
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: 35/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/01/2022	5 Payee name Patreon	
6 Amount (\$) \$5.41	7 Payee address; City; State; Zip Code 395 Page Mill RD Palo Alto, CA 94306	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brad Swail's "The Austin City Councilman" podcast.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2022	Payee name Patreon	
Amount (\$) \$5.41	Payee address; City; State; Zip Code 395 Page Mill RD Palo Alto, CA 94306	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brad Swail's "The Austin City Councilman" podcast.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/13/2022	Payee name Premiere Political Communications	
Amount (\$) \$870.56	Payee address; City; State; Zip Code 4805 Woodview Austin , TX 78756	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Voter Contact	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text.
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: 36/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/13/2022	5 Payee name Premiere Political Communications	
6 Amount (\$) \$896.80	7 Payee address; City; State; Zip Code 4805 Woodview Austin , TX 78756	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Voter Contact	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/22/2022	Payee name Premiere Political Communications	
Amount (\$) \$535.70	Payee address; City; State; Zip Code 4805 Woodview Austin , TX 78756	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Voter Contact	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/30/2022	Payee name Premiere Political Communications	
Amount (\$) \$321.31	Payee address; City; State; Zip Code 4805 Woodview Austin , TX 78756	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Voter Contact	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text.
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: 37/51 Rpt:	2 FILER NAME Virden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/30/2022	5 Payee name Premiere Political Communications	
6 Amount (\$) \$319.55	7 Payee address; City; State; Zip Code 4805 Woodview Austin , TX 78756	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Voter Contact	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/14/2022	Payee name Premiere Political Communications	
Amount (\$) \$372.57	Payee address; City; State; Zip Code 4805 Woodview Austin , TX 78756	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Voter Contact	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2022	Payee name Premiere Political Communications	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 4805 Woodview Austin , TX 78756	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Voter Contact	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text.
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: 38/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/30/2022	5 Payee name Premiere Political Communications	
6 Amount (\$) \$2,375.30	7 Payee address; City; State; Zip Code 4805 Woodview Austin , TX 78756	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Voter Contact	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/18/2022	Payee name Rush Order Tees	
Amount (\$) \$464.26	Payee address; City; State; Zip Code 2727 Commerce Way Philadelphia, PA 19154	
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 Campaign t-shirts.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/16/2022	Payee name Sam's Club	
Amount (\$) \$25.50	Payee address; City; State; Zip Code 9700 N. Capital of TX HWY Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Envelopes.
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: 39/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/01/2022	5 Payee name Sam's Club	
6 Amount (\$) \$12.75	7 Payee address; City; State; Zip Code 9700 N. Capital of TX HWY Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Envelopes.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/30/2022	Payee name Southside Printing Service	
Amount (\$) \$179.27	Payee address; City; State; Zip Code 3005 S. Lamar BLVD Ste. B-100 Austin , TX 78704	
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 Push cards & business cards.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/11/2022	Payee name Southside Printing Service	
Amount (\$) \$147.22	Payee address; City; State; Zip Code 3005 S. Lamar BLVD Ste. B-100 Austin , TX 78704	
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 Push cards.
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: 40/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/02/2022	5 Payee name Southside Printing Service	
6 Amount (\$) \$147.22	7 Payee address; City; State; Zip Code 3005 S. Lamar BLVD Ste. B-100 Austin , TX 78704	
8 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 Push cards.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/18/2022	Payee name Staples	
Amount (\$) \$154.68	Payee address; City; State; Zip Code 1201 Barbara Jordan BLVD Suite 700 Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Toner.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2022	Payee name Stewart, Jonathan & Kendra	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 4712 Paraiso PKWY Austin , TX 78738	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Refund of check contribution.
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: 41/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/25/2022	5 Payee name Strategic Media Placement, Inc.	
6 Amount (\$) \$7,900.00	7 Payee address; City; State; Zip Code 7669 Stagers Loop Delaware, OH 43015	
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 Consulting.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/16/2022	Payee name Super Cheap Signs	
Amount (\$) \$94.01	Payee address; City; State; Zip Code 9200 Waterford Centre BLVD Suite 100 Austin, TX 78758	
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 Signs.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/18/2022	Payee name Super Cheap Signs	
Amount (\$) \$2,649.74	Payee address; City; State; Zip Code 9200 Waterford Centre BLVD Suite 100 Austin, TX 78758	
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 Signs.
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: 42/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/01/2022	5 Payee name Super Cheap Signs	
6 Amount (\$) \$764.76	7 Payee address; City; State; Zip Code 9200 Waterford Centre BLVD Suite 100 Austin, TX 78758	
8 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 Signs.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2022	Payee name Super Cheap Signs	
Amount (\$) \$104.94	Payee address; City; State; Zip Code 9200 Waterford Centre BLVD Suite 100 Austin, TX 78758	
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 Signs.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2022	Payee name Super Cheap Signs	
Amount (\$) \$385.50	Payee address; City; State; Zip Code 9200 Waterford Centre BLVD Suite 100 Austin, TX 78758	
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 Signs.
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: 43/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 03/24/2022	5 Payee name TX Capitol Parking Meters	
6 Amount (\$) \$4.50	7 Payee address; City; State; Zip Code 1201 San Jacinto Blvd Austin , TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking fee (Campaign issue meeting at TXLege).
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/26/2022	Payee name The Bumper Sticker	
Amount (\$) \$162.38	Payee address; City; State; Zip Code 612 West 34th ST Austin, TX 78705	
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 Art work svc.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/28/2022	Payee name The Bumper Sticker	
Amount (\$) \$101.48	Payee address; City; State; Zip Code 612 West 34th ST Austin, TX 78705	
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 Art work svc.
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: 44/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/05/2022	5 Payee name The Bumper Sticker	
6 Amount (\$) \$162.38	7 Payee address; City; State; Zip Code 612 West 34th ST Austin, TX 78705	
8 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 Art work svc.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/10/2022	Candidate/Officeholder name Office sought Office held	
Payee name The Bumper Sticker		
Amount (\$) \$101.48	Payee address; City; State; Zip Code 612 West 34th ST Austin, TX 78705	
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 Art work svc.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/18/2022	Candidate/Officeholder name Office sought Office held	
Payee name The Bumper Sticker		
Amount (\$) \$40.59	Payee address; City; State; Zip Code 612 West 34th ST Austin, TX 78705	
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 Art work svc.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 45/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 06/02/2022	5 Payee name The Bumper Sticker	
6 Amount (\$) \$40.59	7 Payee address; City; State; Zip Code 612 West 34th ST Austin, TX 78705	
8 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 Art work svc.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/16/2022	Payee name The UPS Store	
Amount (\$) \$192.00	Payee address; City; State; Zip Code 8127 Mesa DR Suite B206 Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 USPS box rental.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/18/2022	Payee name The UPS Store	
Amount (\$) \$6.00	Payee address; City; State; Zip Code 8127 Mesa DR Suite B206 Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Notary for campaign.
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: 46/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/17/2022	5 Payee name Walgreens	
6 Amount (\$) \$9.19	7 Payee address; City; State; Zip Code 8104 Mesa DR Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Notepads.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/21/2022	Payee name Waterloo Media	
Amount (\$) \$1,525.00	Payee address; City; State; Zip Code 8308 N. IH 35 Austin, TX 78753	
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 Radio ads.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/24/2022	Payee name Waterloo Media	
Amount (\$) \$800.00	Payee address; City; State; Zip Code 8308 N. IH 35 Austin, TX 78753	
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 Radio ads.
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: 47/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 01/17/2022	5 Payee name Wix	
6 Amount (\$) \$30.31	7 Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Website.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/20/2022	Payee name Wix	
Amount (\$) \$7.03	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Website.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/17/2022	Payee name Wix	
Amount (\$) \$30.31	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Website.
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: 48/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 02/20/2022	5 Payee name Wix	
6 Amount (\$) \$7.03	7 Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Website.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/17/2022	Payee name Wix	
Amount (\$) \$30.31	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Website.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/20/2022	Payee name Wix	
Amount (\$) \$7.03	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Website.
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: 49/51 Rpt:	2 FILER NAME Virden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/17/2022	5 Payee name Wix	
6 Amount (\$) \$30.31	7 Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Website.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/21/2022	Payee name Wix	
Amount (\$) \$7.03	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Website.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/18/2022	Payee name Wix	
Amount (\$) \$30.31	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Website.
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: 50/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 05/20/2022	5 Payee name Wix	
6 Amount (\$) \$7.03	7 Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Website.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/17/2022	Payee name Wix	
Amount (\$) \$30.31	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Website.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2022	Payee name Wix	
Amount (\$) \$7.03	Payee address; City; State; Zip Code 500 Terry A. Francois BLVD 6th Floor San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office 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 Website.
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: 51/51 Rpt:	2 FILER NAME Viriden, Jennifer M	3 Filer ID (Ethics Commission Filers) 00090501
4 Date 04/30/2022	5 Payee name Zuzu Handmade Mex Food	
6 Amount (\$) \$62.04	7 Payee address; City; State; Zip Code 5770 N. MoPac Expwy Ste. 500 Austin , TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Food & drinks for volunteers.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/30/2022	Payee name Zuzu Handmade Mex Food	
Amount (\$) \$55.63	Payee address; City; State; Zip Code 5770 N. MoPac Expwy Ste. 500 Austin , TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Food & drinks for volunteers.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held