

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00083992	2 Total pages filed: 16				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Maggie	MI MI	OFFICE USE ONLY			
	NICKNAME	LAST Ellis	SUFFIX		Date Received ELECTRONICALLY FILED 02/26/2024		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 3804 Williamsburg Circle		ZIP CODE	Date Hand-delivered or Date Postmarked			
	Austin, TX 78731			Receipt # _____ Amount _____			
				Date Processed _____			
				Date Imaged _____			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Maggie	MI MI				
	NICKNAME	LAST Ellis	SUFFIX				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 3804 Williamsburg Cir		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	Austin, TX 78731						
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(512)	587-8644					
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 type="checkbox"/> July 15 <input checked="" 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	26	2024		02	24	2024
10 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
	03	05	2024	<input type="checkbox"/> General	<input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)			
				Court Of Appeals, Justice Place 2 District 3			

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 16

13 C / OH NAME Ellis, Maggie (Ms.)	14 Filer ID (Ethics Commission Filers) 00083992
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15 NOTICE FROM POLITICAL COMMITTEE(S)	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.		
<input type="checkbox"/> Additional Pages	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 UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	3,498.85
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	16,463.45
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	22,942.71
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	20,000.00

17 AFFIDAVIT

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.

Ms. Maggie Ellis

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 oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - JC/OH

18 FILER NAME Ellis, Maggie (Ms.)		19 Filer ID 00083992	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	3,498.85
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	16,125.95
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	337.50
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 A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/7 Rpt: 4/16
2 FILER NAME Ellis, Maggie (Ms.)		3 Filer ID (Ethics Commission Filers) 00083992
4 Date 02/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aboussie, Karen <hr/> 6 Contributor address; City; State; Zip Code Manchaca, TX 78652	7 Amount of Contribution (\$) \$52.95
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Young Democrats <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Laurie <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$26.63
Contributor's Principal Occupation Lecturer		Contributor's Job Title Lecturer
Contributor's employer/law firm Texas State		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/7 Rpt: 5/16
2 FILER NAME Ellis, Maggie (Ms.)		3 Filer ID (Ethics Commission Filers) 00083992
4 Date 02/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cofer, Richard	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Austin, TX 78703	
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Lawyer
10 Contributor's employer/law firm Cofer & Connelly, PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colburn, Laura	Amount of Contribution (\$) \$10.84
	Contributor address; City; State; Zip Code Austin, TX 78737	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cormie, Julie	Amount of Contribution (\$) \$52.95
	Contributor address; City; State; Zip Code Bastrop, TX 78602	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/7 Rpt: 6/16
2 FILER NAME Ellis, Maggie (Ms.)		3 Filer ID (Ethics Commission Filers) 00083992
4 Date 02/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doscher, David <hr/> 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613	7 Amount of Contribution (\$) \$210.84
8 Contributor's Principal Occupation Computer Programmer		9 Contributor's Job Title Computer Programmer
10 Contributor's employer/law firm AMD		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Anjie <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$20.00
Contributor's Principal Occupation Office Manager		Contributor's Job Title Office Manager
Contributor's employer/law firm Eco-Soil Stabilizers		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanes, Jenna <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$21.37
Contributor's Principal Occupation Policy advisor		Contributor's Job Title Policy advisor
Contributor's employer/law firm City of Austin		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/7 Rpt: 7/16
2 FILER NAME Ellis, Maggie (Ms.)		3 Filer ID (Ethics Commission Filers) 00083992
4 Date 02/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haschke, Donna <hr/> 6 Contributor address; City; State; Zip Code Buda, TX 78610	7 Amount of Contribution (\$) \$52.95
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Julie <hr/> Contributor address; City; State; Zip Code Canyon Lake, TX 78133	Amount of Contribution (\$) \$26.63
Contributor's Principal Occupation Administrative Assistant		Contributor's Job Title Administrative Assistant
Contributor's employer/law firm TruLight		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Savrick & Schumann LLP <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/7 Rpt: 8/16
2 FILER NAME Ellis, Maggie (Ms.)		3 Filer ID (Ethics Commission Filers) 00083992
4 Date 02/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speir, Steve <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78723	7 Amount of Contribution (\$) \$25.00
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stiteler, Mary <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$26.63
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thornton, Roseann <hr/> Contributor address; City; State; Zip Code Marble Falls, TX 78654	Amount of Contribution (\$) \$105.58
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/7 Rpt: 9/16
2 FILER NAME Ellis, Maggie (Ms.)		3 Filer ID (Ethics Commission Filers) 00083992
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tinsley, Jeannine	7 Amount of Contribution (\$) \$37.16
	6 Contributor address; City; State; Zip Code Manchaca, TX 78652	
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, Ruth	Amount of Contribution (\$) \$37.16
	Contributor address; City; State; Zip Code Bastrop, TX 78602	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Richard	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Round Rock, TX 78681	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/7 Rpt: 10/16
2 FILER NAME Ellis, Maggie (Ms.)		3 Filer ID (Ethics Commission Filers) 00083992
4 Date 02/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Terry	7 Amount of Contribution (\$) \$37.16
	6 Contributor address; City; State; Zip Code Lampasas, TX 76550	
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urban, Toni	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vote Pac	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78731	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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: 1/5 Rpt: 11/16	2 FILER NAME Ellis, Maggie (Ms.)	3 Filer ID (Ethics Commission Filers) 00083992
4 Date 02/05/2024	5 Payee name Amy's Ice Cream	
6 Amount (\$) \$11.76	7 Payee address; City; State; Zip Code 3500 Guadalupe Austin, TX 78705	
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 Campaign meeting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/23/2024	Payee name Austin Chronicle	
Amount (\$) \$1,814.00	Payee address; City; State; Zip Code PO Box 4189 Austin, TX 78765	
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 Chronicle Ad
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/26/2024	Payee name Black Austin Democrats	
Amount (\$) \$295.24	Payee address; City; State; Zip Code PO Box 300142 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Black and Blues
Complete ONLY 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: 2/5 Rpt: 12/16	2 FILER NAME Ellis, Maggie (Ms.)	3 Filer ID (Ethics Commission Filers) 00083992
4 Date 02/20/2024	5 Payee name CVS	
6 Amount (\$) \$32.54	7 Payee address; City; State; Zip Code 2213 Airport Austin, TX 78722	
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 Campaign treats
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/24/2024	Payee name Donateway	
Amount (\$) \$89.15	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
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 Online donation fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2024	Payee name DreamHost	
Amount (\$) \$1.99	Payee address; City; State; Zip Code 417 Associated Rd. Brea, CA 92821	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Web hosting
Complete ONLY 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: 3/5 Rpt: 13/16	2 FILER NAME Ellis, Maggie (Ms.)	3 Filer ID (Ethics Commission Filers) 00083992
4 Date 02/15/2024	5 Payee name Hays County Democratic Party	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 215 W San Antonio San Marcos, TX 78666	
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 Hays Democratic Party Newsletter ad
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/10/2024	Payee name Homeslice	
Amount (\$) \$104.80	Payee address; City; State; Zip Code 501 E 53rd Austin, TX 78751	
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 Campaign event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/01/2024	Payee name Mailchimp c/o The Rocket Science Group	
Amount (\$) \$79.95	Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE Ste 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 service
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: 4/5 Rpt: 14/16	2 FILER NAME Ellis, Maggie (Ms.)	3 Filer ID (Ethics Commission Filers) 00083992
4 Date 01/28/2024	5 Payee name ZippityPrint	
6 Amount (\$) \$5,220.74	7 Payee address; City; State; Zip Code 1060 W Bagley Rd Ste 102 Berea, OH 44017	
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 Mail pieces
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/08/2024	Payee name ZippityPrint	
Amount (\$) \$2,218.00	Payee address; City; State; Zip Code 1060 W Bagley Rd Ste 102 Berea, OH 44017	
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 mail pieces
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2024	Payee name ZippityPrint	
Amount (\$) \$5,219.99	Payee address; City; State; Zip Code 1060 W Bagley Rd Ste 102 Berea, OH 44017	
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 mail pieces
Complete ONLY 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: 5/5 Rpt: 15/16	2 FILER NAME Ellis, Maggie (Ms.)	3 Filer ID (Ethics Commission Filers) 00083992
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4 Date 02/22/2024	5 Payee name ZippityPrint
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6 Amount (\$) \$389.14	7 Payee address; City; State; Zip Code 1060 W Bagley Rd Ste 102 Berea, OH 44017
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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 door hangers
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/08/2024	Payee name ZippityPrint
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Amount (\$) \$148.65	Payee address; City; State; Zip Code 1060 W Bagley Rd Ste 102 Berea, OH 44017
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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 Mail fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 1/1 Rpt: 16/16	2 FILER NAME Ellis, Maggie (Ms.)	3 Filer ID (Ethics Commission Filers) 00083992
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4 Date 02/20/2024	5 Payee name Britz, Genesis
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6 Amount (\$) \$237.50 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2902 Musser St Apt 3 Laredo, TX 78043
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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 intern
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2024	Payee name Mendoza, Katherine
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Amount (\$) \$100.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2902 Sunbird Houston, TX 77084
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign intern
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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