CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

			1 Filer ID		2 Total pages fi	led.
	Guide explains how to cor		(Ethics Commis 00085348			13
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
NAME	Ms.	Kodi E.			Date Received	
					ELECTRONIC	
					10/07/2024	
	NICKNAME	LAST		SUFFIX	10/07/2024	
		Sawin				
4 CANDIDATE /	ADDRESS / PO BOX; A	PT / SUITE #; CIT	ΓY;	ZIP CODE	Date Hand-delivered o	or Date Postmarked
OFFICEHOLDER MAILING	PO Box 12104					
ADDRESS					Receipt #	Amount
Change of Address	Austin TV 79711					
	Austin, TX 78711				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Ms.	Kodi E.				
	NICKNAME	LAST		SUFFIX		
		Sawin				
6 CAMPAIGN	STREET ADDRESS (NO			T / SUITE #; CITY;		ATE; ZIP CODE
TREASURER		PO BOX PLEASE),	AP	TTSUITE#, CITT,	517	ATE, ZIP CODE
ADDRESS	2201 Lakeway Blvd.					
(Residence or Business)						
	Lakeway, TX 78734					
7 CAMPAIGN	AREA CODE PH	IONE NUMBER				
7 CAMPAIGN TREASURER		IONE NUMBER	EXTENSION			
PHONE	(512) 627-9604					
8 REPORT TYPE	January 15	X 30th day before		Runoff	1 15th day after ca	mpaign treasurer
		X 30th day before		Kulloli	appointment (offi	
	July 15	8th day before	election	Exceeded modified	Final Report (Atta	ach C/OH-FR)
				reporting limit	-	
9 PERIOD	Month Day Yea	ar		Month Day	Year	
COVERED	07/01/2024	TI	HROUGH	09/26/2024	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Yea	ar F	Primary	Runoff	Other	
	11/05/2024		General	Special		
			Sellerai	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
				State Representa	ative District 19	
		60.2	TO PAGE 2			
<u> </u>						
Forms provided by Te	xas Ethics Commission	www.ei	thics.state.tx.u	S	Versi	ion V4.1.0.48da51f7

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH **COVER SHEET PG 2** 2 of 13

13 C / OH NAME	Sawin, Kodi E. (Ms.)		14 Filer ID (00085348	Ethics Commission Filers))	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expendit These expenditures may have been made without officeholders are required to report this information	the candidate's or office	holder's knowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			_	
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS			
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.0	0	
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 4,656.9	8	
EXPENDITURE TOTALS	3. TOTAL UNITEM	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 2,871.9	3	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE I RIOD	LAST DAY OF THE	\$ 4,708.8	9	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	S OF THE LAST DAY	\$ 10,000.0	0	
17 AFFIDAVIT		l swear, or affirm, under penal true and correct and includes under Title 15, Election Code.				
		М	s. Kodi E. Sawin			
		Signature o	f Candidate or Officehol	der		
AFFIX NO	TARY STAMP / SEAL AB	DVE				
Sworn to and subso	cribed before me, by the s	aid	, this the	day		
of	, 20, to ca	rtify which, witness my hand and seal of office.				
Signature of offic	cer administering	Printed name of officer administering	Title of officer	administering oath		
Forms provided by Te	vas Ethics Commission	www.ethics.state.tx.us		Version V4 1 0 48da51	f	

SUBTOTALS - C/OH		FORM C/OH
	CC	OVER SHEET PG 3
		3 of 13
Sawin, Kodi E. (Ms.)	19 Filer ID 00085348	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 4,656.98
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 2,871.93
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	ONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/4 Rpt: 4/13 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Sawin, Kodi E. (Ms.) 00085348 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 08/09/2024 Baker, David \$100.00 6 Contributor address; City; State; Zip Code Wimberley, TX 78676 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/02/2024 \$104.48 Burleson, Cheree Contributor address; City; State; Zip Code Bryan, TX 77801 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 09/07/2024 Clearkin, Ann \$500.00 Contributor address; City; State; Zip Code Austin, TX 78737 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/23/2024 Donaho, Barbara \$156.56 Contributor address; City; State; Zip Code Austin, TX 78731 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:_ 09/05/2024 Johnson, Johnathan \$26.35 Contributor address; City; State; Zip Code Kerrville, TX 78029 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/4 Rpt: 5/13 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Sawin, Kodi E. (Ms.) 00085348 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 09/20/2024 Langmore, John \$250.00 6 Contributor address; City; State; Zip Code Austin, TX 78703 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/30/2024 Lowenthal, Eugene \$250.00 Contributor address; City; State; Zip Code Austin, TX 78738 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 09/16/2024 Nash, David \$104.48 Contributor address; City; State; Zip Code Harper, TX 78631 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/26/2024 \$104.48 Rocco, Kathleen Contributor address; City; State; Zip Code Lakeway, TX 78734 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 08/07/2024 \$25.00 Sawin, Dean Contributor address; City; State; Zip Code Fort Collins, CO 80526 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/4 Rpt: 6/13 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Sawin, Kodi E. (Ms.) 00085348 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 08/08/2024 Sawin, Kodi 6 Contributor address; City; State; Zip Code Austin, TX 78711 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/19/2024 Seagren, Harlan Contributor address; City; State; Zip Code Garland, TX 75044 Principal occupation / Job title (See Instructions) Employer (See Instructions) Yunex Traffic **Financial Manager** Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:) 09/22/2024 Seagren, Harlan Contributor address; City; State; Zip Code

	Garland, TX 75044			
Principal occu Financial Ma	pation / Job title (See Instructions) nager	Employer (See Instructions Yunex Traffic))	
Date 09/25/2024	Full name of contributor out-of-state PAC Shaw, David Contributor address; City; State; Zip Code	(ID#:)	Amount of Contribution (\$)	\$25.00
Principal occu	Austin, TX 78731 pation / Job title (See Instructions)	Employer (See Instructions	;)	
Date 09/21/2024	Full name of contributor out-of-state PAC Starling, Tammy Contributor address; City; State; Zip Code Austin, TX 78731	(ID#:)	Amount of Contribution (\$)	\$104.48
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	() ()	

SCHEDULE A1

\$1.35

\$2,500.00

\$100.00

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/4 Rpt: 7/13 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Sawin, Kodi E. (Ms.) 00085348 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 08/08/2024 Tuthill, Sarah \$52.40 6 Contributor address; City; State; Zip Code Austin, TX 78734 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/10/2024 \$52.40 Waggoner, Sheryl Contributor address; City; State; Zip Code Lakeway, TX 78734 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:) 09/13/2024 Williford, John \$200.00 Contributor address; City; State; Zip Code Lakeway, TX 78734 Principal occupation / Job title (See Instructions) Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

			EXPENDITURE C	ATEGOF		BOX 8(a)			
Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Constributions/ Donations Made By - Cidt/Awards/Memorials Expense Polling Expense Travel in District Candidate/Officeholder/Political Committee Credit Card Payment The Instruction Guide explains how to complete this form. OTHER (enter a category not listed above)				quipment & Related Expense					
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 1/6 Rpt: 8/13		Sawin, Kodi E. (Ms.)					00085348	
4	Date	5	Payee name						
	08/19/2024		Alfred Stanley & Associates						
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le			
	\$500.00		1409 Hardouin Ave						
			Austin, TX 78703						
8	PURPOSE	(a)	Category (See Categories listed at the top	- 6 41-1 1-		(b) Description			
-	OF	,	Consulting Expense	of this sche	edule)		outs	ide of Texas. Com	plete Schedule T.
	EXPENDITURE					Check if Austin	I, TX	, officeholder living	expense
						Fundraising a	adv	ice	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	С	Office sou	Jht		Office he	eld
	Date		Payee name						
	09/26/2024		Anedot						
	Amount (\$)		Payee address; City;	State;	Zip Co	le			
	\$179.08		1340 Poydras St Ste 1770						
			-						
			New Orleans, LA 70112						
	PURPOSE OF	(a)	Category (See Categories listed at the top	of this sche	edule)	(b) Description			
	EXPENDITURE		Fees					ide of Texas. Com , officeholder living	
									essing fees during
						reporting per			eeenig ieee aannig
	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name	C) Office sou	Jht		Office he	eld
	expenditure to benefit C/OI	Н							
	Date		Payee name						
	08/05/2024		Cates Legal Group						
-	Amount (\$)	\vdash	Payee address; City;	State:	Zip Co	le			
	\$400.00		20210 Silver Stream		•				
			San Antonio, TX 78259						
	PURPOSE OF	(a)	Category (See Categories listed at the top	of this sche	edule)	(b) Description			
	EXPENDITURE		Legal Services					ide of Texas. Com	
						Legal advice	I, I X	, officeholder living	expense
						Legal auvice			
	Complete ONLY if direct	Ľ	Candidate/Officeholder name	~	Office sou	uht		Office he	ald
	expenditure to benefit C/OI			U	SUICE SUU	ji it		Unice he	51U
-									

POLITICAL EXPENDIT CONTRIBUTIONS	URES FROM POL	-ITICAL	
	EXPENDITURE CATEG	ORIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solici Trans Trave Trave OTH

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District DTUED (orbit of contagenerat listed above)

Candidate/Officeholder/Politica Credit Card Payment		ages/Contract Labor OTHER (enter a category not listed above)
Cledit Card Payment	The Instruction Guide explains how to cor	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/6 Rpt: 9/13	Sawin, Kodi E. (Ms.)	00085348
4 Date	5 Payee name	·
07/08/2024	Ecanvasser	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$299.00	31888 Road 132	
	Visalia, CA 93292	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Software license canvassing app
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
Date	Payee name	
08/09/2024	Ecanvasser	
Amount (\$)	Payee address; City; State; Zip Co	de
\$299.00	31888 Road 132	
	Visalia, CA 93292	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
-		Check if Austin, TX, officeholder living expense Software license canvassing app
		Software license canvassing app
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sour	aht Office held
expenditure to benefit C/OI		
Date		
09/09/2024	Payee name Ecanvasser	
Amount (\$)	Payee address; City; State; Zip Col	de
\$299.00	31888 Road 132	
	Visalia, CA 93292	
PURPOSE OF		(b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Software license canvassing app
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI	4	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

			EXPENDITURE CA	TEGOR	IES FOR	BOX 8(a)			-
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - ป Coi	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expen	ise	Loan Repa Office Over Polling Exp Printing Exp Salaries/Wa	ment/Reimbursement nead/Rental Expense ense iense iges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 3/6 Rpt: 10/13		Sawin, Kodi E. (Ms.)					00085348	
4	Date	5	Payee name						
	07/29/2024		Good Party, LLC						
6	Amount (\$)	7	Payee address; City;	State;	Zip Coo	e			٦
	\$10.00		837 NE 90th Ave						
			Portland, OR 97220						
8	PURPOSE	(a)	Category (See Categories listed at the top	of this scher	dule)	b) Description			۲
	OF EXPENDITURE		Fees	01 4.10 22		Check if travel		ide of Texas. Complete Schedule T.	
	EAFENDITORE							c, officeholder living expense	
						Monthly licer	ise	for voter list access	
•	Complete ONIL V if direct	Ľ	Candidate/Officeholder name		"ico cour	L1		Office held	4
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF				ffice soug	nt			
	Date	Γ	Payee name						
	08/20/2024		Good Party, LLC						
	Amount (\$)	\vdash	Payee address; City;	State;	Zip Coo	е			٦
	\$10.00		837 NE 90th Ave						
			Portland, OR 97220						
	PURPOSE	(a)	Category (See Categories listed at the top	of this scher	dule)	b) Description			٦
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.	
								t, officeholder living expense	
						WORKING	ISE	for voter list access	
	Complete <u>ONLY</u> if direct	Ľ	Candidate/Officeholder name	01	ffice souc	ht		Office held	_
	expenditure to benefit C/OF			0.	11100 3042	in and a second s			
	Date	—	Payee name						=
	09/23/2024		Good Party, LLC						
	Amount (\$)	┝	Payee address; City;	State:	Zip Coo	۵			-
	\$10.00		837 NE 90th Ave	01110,	21p 000	e			
	+=•···								
			Portland, OR 97220						
	PURPOSE OF	(a)	Category (See Categories listed at the top	of this scher	dule)	b) Description			
	EXPENDITURE		Fees					ide of Texas. Complete Schedule T. K, officeholder living expense	
								for voter list access	
-	Complete ONLY if direct	L(Candidate/Officeholder name	01	ffice soug	ht		Office held	_
	expenditure to benefit C/OF								
									۲

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

		EXPENDITURE CATEGORI	ES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gift/Awards/Memorials Expense F	oan Repayment/Reinbursement 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)
1	Total pages Schedule F1:	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 4/6 Rpt: 11/13	Sawin, Kodi E. (Ms.)		00085348
4	Date	Payee name		
	09/13/2024	Good Party, LLC		
6	Amount (\$)	Payee address; City; State;	Zip Code	
	\$301.91	337 NE 90th Ave		
		Portland, OR 97220		
8	PURPOSE	Category (See Categories listed at the top of this schedu	ule) (b) Description	
	OF	Advertising Expense	· ·	el outside of Texas. Complete Schedule T.
	EXPENDITURE			tin, TX, officeholder living expense
			Text messa	iging
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Off	ice sought	Office held
	Date	^D ayee name		
	08/20/2024	Oliver, Jackie		
	Amount (\$)	Payee address; City; State;	Zip Code	
	\$68.34	1910 Westward Ho Trail		
		Austin, TX 78734		
	PURPOSE OF	Category (See Categories listed at the top of this schedu		
	EXPENDITURE	Salaries/Wages/Contract Labor		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
			Canvasser	
	Complete ONLY if direct	andidate/Officeholder name Off	ice sought	Office held
	expenditure to benefit C/OF			
	Date	Pavee name		
	08/30/2024	Oliver, Jackie		
	Amount (\$)		Zip Code	
	\$100.00	1911 Westward Ho Trail		
	φ100.00			
		Austin, TX 78734		
	PURPOSE	Category (See Categories listed at the top of this schedu	·	
	OF EXPENDITURE	Salaries/Wages/Contract Labor		el outside of Texas. Complete Schedule T.
				tin, TX, officeholder living expense
			Canvasser	
	Complete ONILV if direct	andidate/Officeholder name Off	ioo cought	Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Onicenoider name On	ice sought	Office field

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expense		C P Dense P S	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)			
1	Total pages Schedule F1:	2 FI	ILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 5/6 Rpt: 12/13		awin, Kodi E. (Ms.)	00085348							
4	Date	5 Pa	ayee name								
	09/20/2024	Oliver, Jackie									
6	Amount (\$)	7 Payee address; City; State; Zip Code									
	\$210.00	1912 Westward Ho Trail									
		Austin, TX 78734									
8	PURPOSE					b) Description					
Ū	OF		ategory (See Categories listed at the tr alaries/Wages/Contract Labo		ule)		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE	0	alaries/wages/contract Lab			Check if Austir	n, TX,	, officeholder living expense			
						Canvasser					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	Offi	ice soug	ht		Office held			
	Date	Pá	ayee name								
09/19/2024 Pedernales Farmers											
Amount (\$) Payee address; City; State; Zip Code											
\$35.00 23526 State Hwy 71											
			,								
	Spicewood, TX 78669										
	PURPOSE	(a) Ca	ategory (See Categories listed at the to	op of this schedu	ule) (b) Description					
	OF EXPENDITURE	E	vent Expense					ide of Texas. Complete Schedule T.			
						Check if Austin, TX, officeholder living expense Vendor slip for campaign					
						vendor silp i	orc	campaign			
		0	didata (Office la clatera a const	04							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	OIII	ice soug	nı	Construction Office held				
	Date		Payee name								
	07/29/2024	S	San Antonio Express News								
	Amount (\$)	Payee address; City; State; Zip Code									
\$19.96 420 Broadway,											
		San Antonio, TX 78205									
	PURPOSE	(a) Ca	ategory (See Categories listed at the to	op of this schedu	ule) (b) Description					
			ubscription				outsi	ide of Texas. Complete Schedule T.			
EXPENDITORE Check if Austin, TX, officeholder living expense											
						Newspaper s	subs	scription			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held								Office held			
expenditure to benefit C/OH											

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense		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)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 6/6 Rpt: 13/13		Sawin, Kodi E. (Ms.)					00085348			
4	Date	5	Payee name								
	08/26/2024	San Antonio Express News									
6	Amount (\$)	7 Payee address; City; State; Zip Code									
	\$19.96	420 Broadway,									
		San Antonio, TX 78205									
8	PURPOSE	(a)	Category (See Categories listed at the top o	f this schodul		b) Description					
-	OF		Subscription				outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE		·					, officeholder living expense			
						Newspaper s	subs	scription			
9	Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH										
	Date		Payee name								
	09/23/2024		San Antonio Express News								
	Amount (\$) Payee address; City; State; Zip Code \$19.96 420 Broadway,										
			San Antonio, TX 78205								
	PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description										
OF EXPENDITURE			Subscription				ide of Texas. Complete Schedule T.				
					Check if Austin, TX, officeholder living expense Newspaper subscription						
						Newspaper 3	subs	scription			
_	Complete ONLY if direct		Candidate/Officeholder name	Offic	ce soug	ht		Office held			
expenditure to benefit C/OF			5								
_	Date		Payee name								
09/09/2024			X Corp.								
Amount (\$)			Payee address; City; State; Zip Code								
\$90.72 1355 Market St, Ste 900											
	\$00.12										
San Francisco, CA 94103											
	PURPOSE OF	(a)	Category (See Categories listed at the top o	f this schedul	le) (b) Description					
	EXPENDITURE		Fees					ide of Texas. Complete Schedule T.			
Check if Austin, TX, officeholder living expense Software enhancement for paid users											
						Continuite elli	an				
-	Complete ONLY if direct	Ľ	Candidate/Officeholder name	Offic	ce soug	ht		Office held			
expenditure to benefit C/OH											