

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **SPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Had Enough Austin?		13 Filer ID (Ethics Commission Filers) 00090519				
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME Casey Ramos OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Council Member, District 2				
	<input type="checkbox"/> Measure	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">BALLOT IDENTIFICATION / #</td> <td style="width:40%;">ELECTION DATE</td> </tr> <tr> <td></td> <td style="text-align: center;">Month Day Year</td> </tr> </table>	BALLOT IDENTIFICATION / #	ELECTION DATE		Month Day Year
	BALLOT IDENTIFICATION / #	ELECTION DATE				
		Month Day Year				
DESCRIPTION						
15 CONTRIBUTION TOTALS		1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 41,450.00				
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00 4. TOTAL POLITICAL EXPENDITURES \$ 5,068.73					
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 41,450.00					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00					

16 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.

 Ellen Wood
 Signature of Campaign Treasurer

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

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE

FORM SPAC
ADDENDUM

Page 3 of 13

12 COMMITTEE NAME Had Enough Austin?	13 Filer ID (Ethics Commission Filers) 00090519
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14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICE HOLDER	CANDIDATE / OFFICE HOLDER NAME Dr. Jennifer Mushtaler
	<input type="checkbox"/> MEASURE	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Council Member, District 6
	BALLOT IDENTIFICATION DESCRIPTION	ELECTION DATE MONTH DAY YEAR

COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input type="checkbox"/> SUPPORT (Candidate or Measure) <input checked="" type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICE HOLDER	CANDIDATE / OFFICE HOLDER NAME Allison Alter
	<input type="checkbox"/> MEASURE	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Council Member, District 10
	BALLOT IDENTIFICATION DESCRIPTION	ELECTION DATE MONTH DAY YEAR

SUBTOTALS - SPAC

17 COMMITTEE NAME Had Enough Austin?	18 Filer ID (Ethics Commission Filers) 00090519
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19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 16,450.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 80,750.00
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 25,000.00
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
9.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 5,068.73
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
14.	<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: 1/1 Rpt: 5/13
2 FILER NAME Had Enough Austin?		3 Filer ID (Ethics Commission Filers) 00090519
4 Date 10/05/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Head, Ray (Mr.)	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code 7402 Downridge Drive Austin, TX 78731	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not employed
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Steve (Mr.)	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code 405 W. 14th Street Austin, TX 78701	
Principal occupation / Job title (See Instructions) Executive Chairman		Employer (See Instructions) Capstar Partners
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, John (Mr.)	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code 3839 Bee Caves Road Suite 204 Austin, TX 78746	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) John Lewis Co
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarron, William (Mr.)	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code 4509 Spanish Oaks Ter Austin, TX 78731	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not employed
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oswalt, John (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 2200 Windsor Road Austin, TX 78703	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not employed

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: Sch: 1/5 Rpt: 6/13	
2 FILER NAME Had Enough Austin?		3 Filer ID (Ethics Commission Filers) 00090519	
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0.00	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Chris (Mr.)	8 Amount of pledge (\$) \$250.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 221 W 6th St STE 1400 Austin, TX 78701		
10 Principal occupation / Job title (See Instructions) Managing Director		11 Employer (See Instructions) Wortham Insurance	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Bill (Mr.)	8 Amount of pledge (\$) \$1,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 303 Colorado Suite 2300 Austin, TX 78701		
10 Principal occupation / Job title (See Instructions) Lawyer		11 Employer (See Instructions) DuBois, Bryant & Campbell	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chestnutt, Roy (Mr.)	8 Amount of pledge (\$) \$1,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 345 Park Ave New York, NY 10154		
10 Principal occupation / Job title (See Instructions) Senior Advisor		11 Employer (See Instructions) Blackstone	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cumby, Brian (Mr.)	8 Amount of pledge (\$) \$10,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 9229 Waterford Centre Blvd. Bldg C Suite 100 Austin, TX 78758		
10 Principal occupation / Job title (See Instructions) CEO		11 Employer (See Instructions) Cumby Group	

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: Sch: 2/5 Rpt: 7/13	
2 FILER NAME Had Enough Austin?		3 Filer ID (Ethics Commission Filers) 00090519	
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0.00	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durst, Joyce (Ms.)	8 Amount of pledge (\$) \$1,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 9130 Jollyville Rd Suite 175 Austin, TX 78759		
10 Principal occupation / Job title (See Instructions) CEO		11 Employer (See Instructions) Growth Acceleration Partners	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Don (Mr.)	8 Amount of pledge (\$) \$10,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 3301 Big Bend Austin, TX 78731		
10 Principal occupation / Job title (See Instructions) CEO		11 Employer (See Instructions) PJS of Texas	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Gary (Mr.)	8 Amount of pledge (\$) \$10,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 401 Congress Ave Ste 1500 Austin, TX 78701		
10 Principal occupation / Job title (See Instructions) President		11 Employer (See Instructions) Heritage Title Company	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flieller, James (Mr.)	8 Amount of pledge (\$) \$2,500.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 221 W. Sixth Street Suite 1900 Austin, TX 78701		
10 Principal occupation / Job title (See Instructions) CPA		11 Employer (See Instructions) Cherry Baekart, LLP	

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: Sch: 3/5 Rpt: 8/13	
2 FILER NAME Had Enough Austin?		3 Filer ID (Ethics Commission Filers) 00090519	
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0.00	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flieller, Jane (Ms.)	8 Amount of pledge (\$) \$2,500.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 3129 Honey Tree Lane Austin, TX 78746		
10 Principal occupation / Job title (See Instructions) CPA		11 Employer (See Instructions) Jane A. Flieller, CPA	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harmonson, Cole (Mr.)	8 Amount of pledge (\$) \$1,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 7643 Parkview Circle Austin, TX 78731		
10 Principal occupation / Job title (See Instructions) CEO		11 Employer (See Instructions) Dare Capital	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Mike (Mr.)	8 Amount of pledge (\$) \$10,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code Post Office Box 146 Austin, TX 78767		
10 Principal occupation / Job title (See Instructions) Retired		11 Employer (See Instructions) Retired	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maund, Douglas (Mr.)	8 Amount of pledge (\$) \$10,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 4447 River Garden Trail Austin, TX 78746		
10 Principal occupation / Job title (See Instructions) CEO		11 Employer (See Instructions) Charles Maund Automotive Group	

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: Sch: 4/5 Rpt: 9/13	
2 FILER NAME Had Enough Austin?		3 Filer ID (Ethics Commission Filers) 00090519	
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0.00	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMichael, Jimmy (Dr.)	8 Amount of pledge (\$) \$3,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 2911 Greenlee Dr Austin, TX 78703		
10 Principal occupation / Job title (See Instructions) MD		11 Employer (See Instructions) Capitol Anesthesiology Assn	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nirkin, Howard (Mr.)	8 Amount of pledge (\$) \$5,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 303 Colorado Suite 2300 Austin, TX 78701		
10 Principal occupation / Job title (See Instructions) Lawyer		11 Employer (See Instructions) DuBois, Bryant & Campbell	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Jerry (Mr.)	8 Amount of pledge (\$) \$5,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 5100 Hwy 290 West Building 2, Suite 200 Austin, TX 78735		
10 Principal occupation / Job title (See Instructions) Principal		11 Employer (See Instructions) Development2000, Inc.	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesmer, Darrell (Mr.)	8 Amount of pledge (\$) \$500.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 1200 Egger Ave Round Rock, TX 78664		
10 Principal occupation / Job title (See Instructions) Compliance Officer		11 Employer (See Instructions) vcfo	

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: Sch: 5/5 Rpt: 10/13	
2 FILER NAME Had Enough Austin?		3 Filer ID (Ethics Commission Filers) 00090519	
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0.00	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Gary (Mr.)	8 Amount of pledge (\$) \$1,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 901 S. Mopac Expressway Building II, Suite 350 Austin, TX 78746		
10 Principal occupation / Job title (See Instructions) President		11 Employer (See Instructions) Focus Strategies	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Von Der Bruegge, Hank (Mr.)	8 Amount of pledge (\$) \$1,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 206 Allison Rd Taylor, TX 76574		
10 Principal occupation / Job title (See Instructions) Vice President		11 Employer (See Instructions) Durcon Incorporated	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilfley, Mike (Mr.)	8 Amount of pledge (\$) \$1,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 7404 Waldon Drive Austin, TX 78750		
10 Principal occupation / Job title (See Instructions) COO		11 Employer (See Instructions) vcfo	
5 Date 10/05/2020	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Ellen (Ms.)	8 Amount of pledge (\$) \$5,000.00	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code 6836 Austin Center Boulevard 1-280 Austin, TX 78731		
10 Principal occupation / Job title (See Instructions) CEO		11 Employer (See Instructions) vcfo	

**MONETARY CONTRIBUTIONS FROM
CORPORATION OR LABOR ORGANIZATION**

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/1 Rpt: 11/13
2 FILER NAME Had Enough Austin?		3 Filer ID (Ethics Commission Filers) 00090519
4 Date 10/05/2020	5 Corporation / Labor Organization name Continental Automotive Group	7 Amount of contribution (\$) \$25,000.00
	6 Corporation / Labor Organization address; City; State; Zip Code 6757 Airport Blvd Austin, TX 78752	

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: Sch: 1/2 Rpt: 12/13	2 FILER NAME Had Enough Austin?	3 Filer ID (Ethics Commission Filers) 00090519
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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5 Date 10/05/2020	6 Payee name Aro Group, LLC
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7 Amount (\$) \$890.00	8 Payee address; City; State; Zip Code 2509 Lazy Oaks Drive Austin, TX 78745
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OTHER: Voter Data/Software

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Ramos, Casey (Mr.)	Office sought	Office held
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Date 10/05/2020	Payee name GoDaddy Operating Company, LLC
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Amount (\$) \$178.73	Payee address; City; State; Zip Code 14455 N. Hayden Rd Ste. 219 Scottsdale, AZ 85260
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense URL registrations: Had Enough Austin .com .net .org

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Ramos, Casey (Mr.)	Office sought	Office held
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UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: Sch: 2/2 Rpt: 13/13	2 FILER NAME Had Enough Austin?	3 Filer ID (Ethics Commission Filers) 00090519
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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5 Date 10/05/2020	6 Payee name Walker, David
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7 Amount (\$) \$4,000.00	8 Payee address; City; State; Zip Code 900 Pebble Drive Buchanan Dam, TX 78609
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 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 Advertising Expense
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Ramos, Casey (Mr.)	Office sought	Office held
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