

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)	2 Total pages filed: <div style="text-align: center; font-size: 24px; font-weight: bold;">18</div>																		
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 8px;">MS / MRS / MR</td> <td style="width:35%; font-size: 8px;">FIRST</td> <td style="width:15%; font-size: 8px;">MI</td> </tr> <tr> <td style="font-size: 18px; font-weight: bold;">Mrs.</td> <td style="font-size: 24px; font-weight: bold;">Kristin</td> <td style="font-size: 24px; font-weight: bold;">V</td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td style="font-size: 8px;">LAST</td> <td style="font-size: 8px;">SUFFIX</td> </tr> <tr> <td></td> <td style="font-size: 24px; font-weight: bold;">Ashly</td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI	Mrs.	Kristin	V	NICKNAME	LAST	SUFFIX		Ashly		OFFICE USE ONLY							
MS / MRS / MR	FIRST	MI																			
Mrs.	Kristin	V																			
NICKNAME	LAST	SUFFIX																			
	Ashly																				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: 8px;">ADDRESS / PO BOX;</td> <td style="width:25%; font-size: 8px;">APT / SUITE #;</td> <td style="width:25%; font-size: 8px;">CITY;</td> <td style="width:25%; font-size: 8px;">STATE;</td> <td style="width:20%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="font-size: 18px; font-weight: bold;">7210 Montana Norte Austin TX 78731</td> </tr> </table>			ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	7210 Montana Norte Austin TX 78731					Date Received UC129 18 0:4/HF							
ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE																	
7210 Montana Norte Austin TX 78731																					
5 CANDIDATE / OFFICEHOLDER PHONE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: 8px;">AREA CODE</td> <td style="width:40%; font-size: 8px;">PHONE NUMBER</td> <td style="width:35%; font-size: 8px;">EXTENSION</td> </tr> <tr> <td></td> <td style="font-size: 18px; font-weight: bold;">(512) 608-4118</td> <td></td> </tr> </table>			AREA CODE	PHONE NUMBER	EXTENSION		(512) 608-4118		Date Hand-delivered or Date Postmarked											
AREA CODE	PHONE NUMBER	EXTENSION																			
	(512) 608-4118																				
6 CAMPAIGN TREASURER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 8px;">MS / MRS / MR</td> <td style="width:35%; font-size: 8px;">FIRST</td> <td style="width:15%; font-size: 8px;">MI</td> </tr> <tr> <td style="font-size: 18px; font-weight: bold;">Mrs.</td> <td style="font-size: 24px; font-weight: bold;">Jolie</td> <td></td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td style="font-size: 8px;">LAST</td> <td style="font-size: 8px;">SUFFIX</td> </tr> <tr> <td></td> <td style="font-size: 24px; font-weight: bold;">Willis</td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI	Mrs.	Jolie		NICKNAME	LAST	SUFFIX		Willis		Receipt #	Amount \$						
MS / MRS / MR	FIRST	MI																			
Mrs.	Jolie																				
NICKNAME	LAST	SUFFIX																			
	Willis																				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%; font-size: 8px;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:15%; font-size: 8px;">APT / SUITE #;</td> <td style="width:15%; font-size: 8px;">CITY;</td> <td style="width:15%; font-size: 8px;">STATE;</td> <td style="width:10%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="font-size: 18px; font-weight: bold;">106 East Lisa Drive Austin TX 78752</td> </tr> </table>			STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE	106 East Lisa Drive Austin TX 78752					Date Processed							
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9 REPORT TYPE	<table style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input checked="" type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<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 \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)										
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: 8px;">Month</td> <td style="width:10%; font-size: 8px;">Day</td> <td style="width:15%; font-size: 8px;">Year</td> <td style="width:10%;"></td> <td style="width:10%; font-size: 8px;">Month</td> <td style="width:10%; font-size: 8px;">Day</td> <td style="width:15%; font-size: 8px;">Year</td> </tr> <tr> <td style="font-size: 24px; font-weight: bold;">10</td> <td style="font-size: 24px; font-weight: bold;">/ 7</td> <td style="font-size: 24px; font-weight: bold;">/ 2018</td> <td style="font-weight: bold;">THROUGH</td> <td style="font-size: 24px; font-weight: bold;">10</td> <td style="font-size: 24px; font-weight: bold;">/ 29</td> <td style="font-size: 24px; font-weight: bold;">/ 2018</td> </tr> </table>			Month	Day	Year		Month	Day	Year	10	/ 7	/ 2018	THROUGH	10	/ 29	/ 2018				
Month	Day	Year		Month	Day	Year															
10	/ 7	/ 2018	THROUGH	10	/ 29	/ 2018															
11 ELECTION	<table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="font-size: 8px;">ELECTION DATE</td> </tr> <tr> <td style="width:33%; font-size: 8px;">Month</td> <td style="width:33%; font-size: 8px;">Day</td> <td style="width:34%; font-size: 8px;">Year</td> </tr> <tr> <td style="font-size: 18px; font-weight: bold;">11</td> <td style="font-size: 18px; font-weight: bold;">/ 06</td> <td style="font-size: 18px; font-weight: bold;">/ 2018</td> </tr> </table>	ELECTION DATE			Month	Day	Year	11	/ 06	/ 2018	<table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="font-size: 8px;">ELECTION TYPE</td> </tr> <tr> <td style="width:33%;"><input type="checkbox"/> Primary</td> <td style="width:33%;"><input type="checkbox"/> Runoff</td> <td style="width:34%;"><input type="checkbox"/> Other Description</td> </tr> <tr> <td><input checked="" type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>		ELECTION TYPE			<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special	
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<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special																				
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) <div style="font-size: 18px; font-weight: bold;">Austin ISD Trustee, District Four (4)</div>																			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Kristin Ashy 15 Filer ID (Ethics Commission Filers)

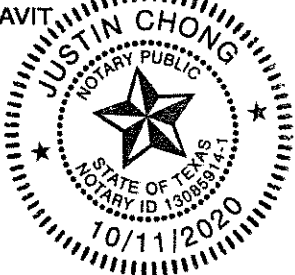
16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

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

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ —
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 11,393.64
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ —
	4. TOTAL POLITICAL EXPENDITURES	\$ 18,321.50
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,301.89
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ —

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

Kristin Ashy
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Kristin Vondenhoff Ashy, this the 29th day of October, 2018, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Justin Chong
Printed name of officer administering oath

Notary Officer
Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Kristin Ashy		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,518.64
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 875.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ —
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ —
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 18,321.50
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ —
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ —
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ —
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ —
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ —
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE 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:
12

2 FILER NAME

Kristin Ashy

3 Filer ID (Ethics Commission Filers)

4 Date

9/30/2018

5 Full name of contributor

Julie Hall

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$79.26

6 Contributor address;

City; State; Zip Code

3324 Perry Lane Austin TX 78731

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/30/2018

Full name of contributor

Fritz and Lindsay Fitzpatrick

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$30.00

Contributor address;

City; State; Zip Code

2807 W. Fresco Dr. Austin TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/1/2018

Full name of contributor

Jennifer Rodriguez

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$263.47

Contributor address;

City; State; Zip Code

7215 Valburn Dr. Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/2/2018

Full name of contributor

Shay Rogillio

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$26.63

Contributor address;

City; State; Zip Code

3316 Perry Lane Austin TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

12

2 FILER NAME

Kristin Ashy

3 Filer ID (Ethics Commission Filers)

4 Date

10/3/2018

5 Full name of contributor

Sarah Haegelin

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$ 52.95

6 Contributor address; City; State; Zip Code

4201 Prickly Pear Dr. Austin TX 78731

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/7/2018

Full name of contributor

Margaret Bettinger

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$52.95

Contributor address; City; State; Zip Code

8509 Greenflint Austin TX 78759

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/9/2018

Full name of contributor

Julie Grisham

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$52.95

Contributor address; City; State; Zip Code

3616 Far West Blvd. Austin TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/12/2018

Full name of contributor

Sandy Dochen

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$105.58

Contributor address; City; State; Zip Code

5010 North Rim Drive Austin TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

12

2 FILER NAME

Kristin Ashy

3 Filer ID (Ethics Commission Filers)

4 Date

10/12/2018

5 Full name of contributor

out-of-state PAC (ID#: _____)

Vicki De Neese

6 Contributor address;

City; State; Zip Code

7504 Crossdraw Dr. Austin TX 78731

7 Amount of contribution (\$)

\$105.58

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/17/2018

Full name of contributor

out-of-state PAC (ID#: _____)

Ernest M. Groos IV

Contributor address;

City; State; Zip Code

7301 Burnet, #102-529 Austin, TX 78757

Amount of contribution (\$)

\$1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/2018

Full name of contributor

out-of-state PAC (ID#: _____)

Jennifer and Trey Webb

Contributor address;

City; State; Zip Code

7803 Mesa Dr. Austin, TX 78731

Amount of contribution (\$)

\$526.63

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/2018

Full name of contributor

out-of-state PAC (ID#: _____)

Allison Small

Contributor address;

City; State; Zip Code

4203 Venado Dr. Austin, TX 78731

Amount of contribution (\$)

\$526.63

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

12

2 FILER NAME

Kristin Ashy

3 Filer ID (Ethics Commission Filers)

4 Date

10/17/2018

5 Full name of contributor

Bianca Chachanashvili

out-of-state PAC (ID#: _____)

6 Contributor address; City; State; Zip Code

3932 Knollwood Dr. Austin TX 78731

7 Amount of contribution (\$)

\$ 105.58

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/17/2018

Full name of contributor

Ashley Ashy

out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

9411 Greencape Ct. Humble TX 77396

Amount of contribution (\$)

\$ 263.47

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/2018

Full name of contributor

Ascension Hajibashi

out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

6903 Ligustrum Cove Austin TX 78750

Amount of contribution (\$)

\$ 105.58

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/2018

Full name of contributor

Jason Fulmer

out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

7702 Merrybrook Circle Austin TX 78731

Amount of contribution (\$)

\$ 210.84

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

12

2 FILER NAME

Kristin Ashy

3 Filer ID (Ethics Commission Filers)

4 Date

10/17/2018

5 Full name of contributor out-of-state PAC (ID#: _____)

Maureen Nagle

7 Amount of contribution (\$)

\$26.63

6 Contributor address; City; State; Zip Code

308 Jeffrey David Ln. W Austin, TX 78717

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/17/2018

Full name of contributor out-of-state PAC (ID#: _____)

Jennifer Mierl

Amount of contribution (\$)

\$26.63

Contributor address; City; State; Zip Code

4204 Cat Hollow Drive Austin TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/2018

Full name of contributor out-of-state PAC (ID#: _____)

Julie Payne

Amount of contribution (\$)

\$105.58

Contributor address; City; State; Zip Code

7304 Valburn Dr. Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/2018

Full name of contributor out-of-state PAC (ID#: _____)

Melinda Anderson

Amount of contribution (\$)

\$26.63

Contributor address; City; State; Zip Code

8301 Asmara Dr. Austin TX 78750

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

12

2 FILER NAME

Kristin Ashy

3 Filer ID (Ethics Commission Filers)

4 Date

10/17/2018

5 Full name of contributor

Jennifer Marlowe

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$ 52.95

6 Contributor address;

8211 Asmara

City; State; Zip Code

Austin TX 78750

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/17/2018

Full name of contributor

Julie Addington

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$105.58

Contributor address;

7205 W. Rim

City; State; Zip Code

Austin TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/2018

Full name of contributor

Bart Arnold

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$105.58

Contributor address;

8401 Emerald Hill Dr. Austin TX 78759

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/2018

Full name of contributor

Kathleen Mabley

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$105.58

Contributor address;

7112 Sungate Drive Austin TX 78731

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

12

2 FILER NAME

Kristin Ashy

3 Filer ID (Ethics Commission Filers)

4 Date

10/17/2018

5 Full name of contributor

out-of-state PAC (ID#: _____)

Megan Rothwell

6 Contributor address; City; State; Zip Code

6206 Shadow Mountain Dr. Austin TX 78731

7 Amount of contribution (\$)

\$ 52.95

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/17/2018

Full name of contributor

out-of-state PAC (ID#: _____)

Julie Waidelich

Contributor address; City; State; Zip Code

4303 Lostridge Dr. Austin TX 78731

Amount of contribution (\$)

\$ 105.58

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/2018

Full name of contributor

out-of-state PAC (ID#: _____)

Amanda and Phil Swann

Contributor address; City; State; Zip Code

4008 Edgerock Dr. Austin TX 78731

Amount of contribution (\$)

\$ 52.95

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/2018

Full name of contributor

out-of-state PAC (ID#: _____)

Valerie and Craig Tyler

Contributor address; City; State; Zip Code

6500 Mesa Dr. Austin, TX 78731

Amount of contribution (\$)

\$ 263.47

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1:
12

2 FILER NAME

Kristin Ashby

3 Filer ID (Ethics Commission Filers)

4 Date

10/18/2018

5 Full name of contributor out-of-state PAC (ID#: _____)

Kevin Hunter

7 Amount of contribution (\$)

\$263.47

6 Contributor address; City; State; Zip Code

1408 Ethridge Austin TX 78703

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/16/2018

Full name of contributor out-of-state PAC (ID#: _____)

Susan and Ben Bufkin

Amount of contribution (\$)

\$105.58

Contributor address; City; State; Zip Code

4005 Edgefield Court Austin TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/18/2018

Full name of contributor out-of-state PAC (ID#: _____)

Tracy Sheridan & Renee Francis

Amount of contribution (\$)

\$52.95

Contributor address; City; State; Zip Code

5000 Greystone Dr. Austin TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/18/2018

Full name of contributor out-of-state PAC (ID#: _____)

Mike Gerber

Amount of contribution (\$)

\$526.63

Contributor address; City; State; Zip Code

7849 Eldorado Dr. Austin TX 78737

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

12

2 FILER NAME

Kristin Ashy

3 Filer ID (Ethics Commission Filers)

4 Date

10/19/2018

5 Full name of contributor

Allison Edwards

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$105.58

6 Contributor address;

City; State; Zip Code

2500 Woodmont Ave. Austin TX 78703

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/19/2018

Full name of contributor

Jennifer Verde

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$52.95

Contributor address;

City; State; Zip Code

8832 Mountain Path Cir. Austin TX 78759

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/20/2018

Full name of contributor

Ellen Fenwick

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$263.47

Contributor address;

City; State; Zip Code

7500 Stepdown Cove Austin TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/20/2018

Full name of contributor

Stan and Bergan Casey

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

5005 Westview Dr. Austin TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

12

2 FILER NAME

Kristin Ashy

3 Filer ID (Ethics Commission Filers)

4 Date

10/21/2018

5 Full name of contributor

Mark Bellman

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$ 52.95

6 Contributor address;

City; State; Zip Code

5601 Van Winkle Lane Austin TX 78739

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/21/2018

Full name of contributor

Lori Magruder

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 368.74

Contributor address;

City; State; Zip Code

7203 Montana Norte Austin TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/23/2018

Full name of contributor

Suzette Musgrove

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 105.58

Contributor address;

City; State; Zip Code

13884 Wheadon Court Draper UT 84020

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/23/2018

Full name of contributor

Rhonda Bly

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 49.79

Contributor address;

City; State; Zip Code

8450 Antero Drive Austin TX 78759

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

12

2 FILER NAME

Kristin Ashy

3 Filer ID (Ethics Commission Filers)

4 Date

10/18/2018

5 Full name of contributor

Julie Range

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$20.⁰⁰

6 Contributor address;

5807 Cyrilla Dr.

City; State; Zip Code

Austin TX 78759

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/23/2018

Full name of contributor

Sanjay Nasta

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$105.58

Contributor address;

7886 Lakewood Dr.

City; State; Zip Code

Austin TX 78750

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/23/2018

Full name of contributor

Kirk Ashy

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$3,421.37

Contributor address;

7210 Montana Norte Austin TX 78731

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/23/2018

Full name of contributor

Nate Little

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$105.58

Contributor address;

6607 Argentia Rd. Austin TX 78757

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
12

2 FILER NAME

Kristin Ashy

3 Filer ID (Ethics Commission Filers)

4 Date

10/23/2018

5 Full name of contributor

out-of-state PAC (ID#: _____)

Steven Sifner

6 Contributor address;

City; State; Zip Code

10300 Jollyville Rd., #232 Austin TX 78759

7 Amount of contribution (\$)

\$42.42

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/24/2018

Full name of contributor

out-of-state PAC (ID#: _____)

Lauren Honza

Contributor address;

City; State; Zip Code

4013 Far West Blvd. Austin TX 78731

Amount of contribution (\$)

\$26.63

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/24/2018

Full name of contributor

out-of-state PAC (ID#: _____)

Ann O'Connell

Contributor address;

City; State; Zip Code

5805 Gentle Breeze Terrace Austin TX 78731

Amount of contribution (\$)

\$105.58

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/25/2018

Full name of contributor

out-of-state PAC (ID#: _____)

Liz Hocker

Contributor address;

City; State; Zip Code

8111 Two Coves Drive Austin TX 78730

Amount of contribution (\$)

\$105.58

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <p style="text-align: center;">1</p>	
2 FILER NAME <p style="font-size: 1.2em;">Kristin Ashy</p>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ <u>\$875.00</u>	
5 Date <p style="font-size: 1.2em;">10/8/2018</p>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="font-size: 1.2em;">Lissa Hutchison</p>	8 Amount of Contribution \$ <p style="font-size: 1.2em;">\$875.00</p>	9 In-kind contribution description <p style="font-size: 1.2em;">Graphic Design</p>
7 Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">3501 Laurel Ledge Lane Austin, TX 78731</p>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
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	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
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)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <p style="text-align:center">2</p>	2 FILER NAME <p style="text-align:center">Kristin Ashy</p>	3 Filer ID (Ethics Commission Filers)
4 Date <p style="text-align:center">10-17-2018</p>	5 Payee name <p style="text-align:center">Build A Sign</p>	
6 Amount (\$) <p style="text-align:center">\$195.58</p>	7 Payee address; City; State; Zip Code <p style="text-align:center">11525A Stonehollow Dr., Suite 100 Austin, TX 78758</p>	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <p style="text-align:center">Advertising Expense</p>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <p style="text-align:center">Yard Signs</p>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <p style="text-align:center">10-25-2018</p>	Payee name <p style="text-align:center">Kelly Graphics</p>	
Amount (\$) <p style="text-align:center">\$17,446.91</p>	Payee address; City; State; Zip Code <p style="text-align:center">1409 Quaker Ridge Austin, TX 78746</p>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <p style="text-align:center">Advertising Expense</p>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <p style="text-align:center">Mailers</p>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <p style="text-align:center">10-26-2018</p>	Payee name <p style="text-align:center">Build A Sign</p>	
Amount (\$) <p style="text-align:center">\$195.58</p>	Payee address; City; State; Zip Code <p style="text-align:center">11525A Stonehollow Dr., Suite 100 Austin, TX 78758</p>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <p style="text-align:center">Advertising Expense</p>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <p style="text-align:center">Yard Signs</p>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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 | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2	2 FILER NAME Kristin Ashy	3 Filer ID (Ethics Commission Filers)
4 Date 9-28-2018 through 10-29-2018	5 Payee name Donateway	
6 Amount (\$) \$483.43	7 Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
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 Credit Card / Online Donations
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED