

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: 17
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Zachary	OFFICE USE ONLY
	NICKNAME	LAST Price	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS		ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE
		13000 Council Bluffs Dr Austin, TX 78727	
5 CANDIDATE / OFFICEHOLDER PHONE		AREA CODE (423)	PHONE NUMBER 262-6415
6 CAMPAIGN TREASURER NAME		MS / MRS / MR Mrs.	FIRST Gentry
		NICKNAME	LAST McLean
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;	CITY; STATE; ZIP CODE
		6314 Gato Path Austin, TX 78731	
8 CAMPAIGN TREASURER PHONE		AREA CODE (512)	PHONE NUMBER 797-6724
9 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 \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED			
Month Day Year THROUGH Month Day Year 9 / 28 / 18 10 / 29 / 18			
11 ELECTION		ELECTION DATE	ELECTION TYPE
		Month Day Year 11 / 06 / 2018	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
12 OFFICE		OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)
			Austin ISO Trustee District Four

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

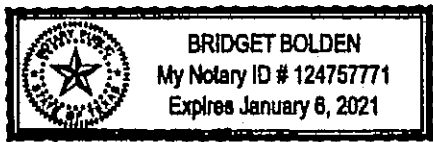
14 C/OH NAME Zachary Price 15 Filer ID (Ethics Commission Filers)

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)	\$ 11,433.11 9,713.7
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 471.37
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 11,433.11
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 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.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Zachary Price, this the 20th day of October, 202018, to certify which, witness my hand and seal of office.

[Signature] Signature of officer administering oath
Bridget Bolden Printed name of officer administering oath
Exec. Assis Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Zachary Price</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ <i>9,454.50</i>
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ <i>259.24</i>
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. <input type="checkbox"/> SCHEDULE E: LOANS		\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ <i>471.37</i>
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: 11
2 FILER NAME Price, Zachary		3 Filer ID (Ethics Commission Filers)
4 Date 9/30	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diane Guadine	7 Amount of contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 3813 McNeil Dr Austin, TX 78727		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lizza Harrison	Amount of contribution (\$) \$52.95
Contributor address; City; State; Zip Code 14707 FM 2769 Volente, TX 78641		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christy Goldbach	Amount of contribution (\$) \$52.95
Contributor address; City; State; Zip Code 1810 Marango St New Orleans, LA 70115		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patricia Schener	Amount of contribution (\$) \$52.95
Contributor address; City; State; Zip Code 7909 W. R. 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: 11
2 FILER NAME Price, Zachary		3 Filer ID (Ethics Commission Filers)
4 Date 10/19	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JoAnn McKenzie	7 Amount of contribution (\$) \$105.58
	6 Contributor address; City; State; Zip Code 6902 Edgefield Dr Austin, TX 78731	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jerry Webberman	Amount of contribution (\$) \$316.11
	Contributor address; City; State; Zip Code 7809 Harvestman Cove Austin, TX 78731	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shari Jankowsky	Amount of contribution (\$) \$26.63
	Contributor address; City; State; Zip Code 6109 Lost Horizon Dr. Austin, TX 78759	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phyllis Worob	Amount of contribution (\$) \$26.63
	Contributor address; City; State; Zip Code 4604 West Rim Cove Austin, TX 78731	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

11

2 FILER NAME

Price, Zachary

3 Filer ID (Ethics Commission Filers)

4 Date

10/19

5 Full name of contributor

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

Susan Berg

7 Amount of contribution (\$)

\$21.37

6 Contributor address; City; State; Zip Code

10602 Sierra Oaks Austin, TX 78759

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/19

Full name of contributor

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

Patricia Goodman

Amount of contribution (\$)

\$79.26

Contributor address; City; State; Zip Code

4300 Tallwood Dr Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/10

Full name of contributor

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

Jodi Schrobilgen

Amount of contribution (\$)

\$26.63

Contributor address; City; State; Zip Code

4008 Galacia Dr Austin, TX 78759

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/10

Full name of contributor

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

Barbara Shack

Amount of contribution (\$)

\$26.63

Contributor address; City; State; Zip Code

710 Glorab St Apt 6C Austin, TX 78701

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:

11

2 FILER NAME

Price, Zachary

3 Filer ID (Ethics Commission Filers)

4 Date

10/12

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

Sean Price

7 Amount of contribution (\$)

\$125.58

6 Contributor address; City; State; Zip Code

13000 Council Bluff Dr Austin, TX 78727

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/14

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

Akshar Patel

Amount of contribution (\$)

\$5.58

Contributor address; City; State; Zip Code

201 E 21st St Austin, TX 78705

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17

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

Gay Thompson

Amount of contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

6006 Mountain Villa Dr Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/18

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

Susan Moffat

Amount of contribution (\$)

\$368.74

Contributor address; City; State; Zip Code

4112 Speedway Austin, TX 78751

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:
11

2 FILER NAME

Price, Zachary

3 Filer ID (Ethics Commission Filers)

4 Date

10/18

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

Carmen Tilton

7 Amount of contribution (\$)

 \$79.26

6 Contributor address; City; State; Zip Code

4000 Jefferson St Austin, TX 78731

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/20

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

Pione Kearns

Amount of contribution (\$)

\$26.63

Contributor address; City; State; Zip Code

3921 Graystone Dr. Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/20

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

Evelyn Muller

Amount of contribution (\$)

\$105.58

Contributor address; City; State; Zip Code

12600 Avery Ranch Blvd Unit 613 Cedar Park, TX 78613

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/21

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

Marisa Romo de Vivar

Amount of contribution (\$)

\$10.84

Contributor address; City; State; Zip Code

8238 Summer Side Dr 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:

11

2 FILER NAME

Price, Zachary

3 Filer ID (Ethics Commission Filers)

4 Date

10/21

5 Full name of contributor

Robert Miskesh

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

7 Amount of contribution (\$)

\$26.63

6 Contributor address;

City; State; Zip Code

8600 Furness Drive Austin, TX 78753

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/23

Full name of contributor

Harrison Keager

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

Amount of contribution (\$)

\$125.58

Contributor address;

City; State; Zip Code

7908 West Rim Dr Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/25

Full name of contributor

Gina Hingjosa

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

Amount of contribution (\$)

\$500.00

Contributor address;

City; State; Zip Code

2220 Parkway Austin, TX 78703

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/28

Full name of contributor

Jennifer Hudson

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

Amount of contribution (\$)

\$31.89

Contributor address;

City; State; Zip Code

7513 Stonecliff Dr Austin, TX 78731

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:

11

2 FILER NAME

Price, Zachary

3 Filer ID (Ethics Commission Filers)

4 Date

10/19

5 Full name of contributor

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

Kenneth + Theresa Treviño

7 Amount of contribution (\$)

\$200.00

6 Contributor address;

City; State; Zip Code

6712 D Valburn Dr Austin, TX 78731

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/19

Full name of contributor

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

Paul + Shawn Dubiel

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

11600 Shoshone Dr Austin, TX 78759

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/19

Full name of contributor

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

Lauren Steppard + David Wolfson

Amount of contribution (\$)

\$300.00

Contributor address;

City; State; Zip Code

6701 Mesa Dr Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/19

Full name of contributor

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

Alan Troy + Elissa Sterling

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

3606 Crowncrest Dr 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:

11

2 FILER NAME

Price, Zachary

3 Filer ID (Ethics Commission Filers)

4 Date

10/19

5 Full name of contributor

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

Mary Gonzales

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City; State; Zip Code

4906 Strass Dr. Austin, TX 78731

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/19

Full name of contributor

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

Leslie Carrans

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

6404 Deerhollow Austin, TX 78750

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/30

Full name of contributor

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

Deborah Trejo

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

1717 Briar St Austin, TX 78704

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/30

Full name of contributor

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

Eric Vormelker and Lisa Schneider

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

103 E Skyview Rd Austin, TX 78752

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:

vi

2 FILER NAME

Price, Zachary

3 Filer ID (Ethics Commission Filers)

4 Date

10/19

5 Full name of contributor

Genevieve Dell

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

7 Amount of contribution (\$)

\$200

6 Contributor address;

City; State; Zip Code

5706 Avenue D Austin, TX 78752

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/19

Full name of contributor

Deborah Trejo

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

Amount of contribution (\$)

\$50.00

Contributor address;

City; State; Zip Code

1717 Briar St Austin, TX 78704

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/30

Full name of contributor

Vichaya Sidhipong & Jiraporn Champheng

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

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

11050 Tangleridge Cir Austin, TX 78736

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/30

Full name of contributor

Lana Le Stevens

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

Amount of contribution (\$)

\$80.00

Contributor address;

City; State; Zip Code

610 Sunfish St Lakeway, TX 78734

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:

1

2 FILER NAME

Porter, Zachary

3 Filer ID (Ethics Commission Filers)

4 Date

10/10

5 Full name of contributor

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

Claudia & Michael Dolan

6 Contributor address;

City; State; Zip Code

7107 Suncate Dr Austin, TX 78731

7 Amount of contribution (\$)

\$100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/9

Full name of contributor

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

Edward & Judith Parker

Contributor address;

City; State; Zip Code

7917 W Rim Drive Austin, TX 78731

Amount of contribution (\$)

\$50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/26

Full name of contributor

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

Judy Schwartz

Contributor address;

City; State; Zip Code

6220 Shellwood Rd Apt 117 Chattanooga, TN 37421

Amount of contribution (\$)

\$20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/13

Full name of contributor

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

Liberal Austin Democrats

Contributor address;

City; State; Zip Code

P.O. Box 49712 Austin, TX 78765

Amount of contribution (\$)

\$100.00

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:

11

2 FILER NAME

Price, Zachary

3 Filer ID (Ethics Commission Filers)

4 Date

10/14

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

Austin Yang Democrats

6 Contributor address; City; State; Zip Code

2024 Simon Ave Apt B Austin, TX 78723

7 Amount of contribution (\$)

\$350.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/14

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

Education Austin PAC

Contributor address; City; State; Zip Code

316 W 12 St. Suite 202 Austin, TX 78721

Amount of contribution (\$)

\$5,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

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: 2	
2 FILER NAME Price, Zachary		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ \$259.24	
5 Date 9/28- 10/29	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debra Price	8 Amount of Contribution \$ \$47.04	9 In-kind contribution description Printing
7 Contributor address; City; State; Zip Code 13000 Council Bluffs Dr Austin TX 78724		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Professor		11 Employer (FOR NON-JUDICIAL) (See Instructions) Texas State University	
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 10/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debra Price	Amount of Contribution \$ \$32.80	In-kind contribution description Refreshments for campaign event
Contributor address; City; State; Zip Code 13000 Council Bluffs Dr Austin TX 78724		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Professor		Employer (FOR NON-JUDICIAL) (See Instructions) Texas State University	
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)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 2	
2 FILER NAME Price, Zachary		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 259.24	
5 Date 10/22	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evelyn Muller	8 Amount of Contribution \$ \$30.80	9 In-kind contribution description Refreshments for Campaign event
7 Contributor address; City; State; Zip Code 12600 Avery Ranch Blvd Cedar Park, TX 78613		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See Instructions) Retired	
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 10/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laura Yeager	Amount of Contribution \$ \$50	In-kind contribution description Refreshments for Campaign event
Contributor address; City; State; Zip Code 7998 W Rim Dr Austin, TX 78731		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Governmental Relations Consultant		Employer (FOR NON-JUDICIAL) (See Instructions) Texas Association of Community Schools	
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)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

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: 111	2 FILER NAME Price, Zachary	3 Filer ID (Ethics Commission Filers)
4 Date 8/20 through 10/29	5 Payee name Donorvoy	
6 Amount (\$) \$207.21	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 / Solicitation / Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 9/18 through 10/29	Payee name Facebook	
Amount (\$) \$103.66	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook Ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 10/14	Payee name Worley Printing	
Amount (\$) \$160.00	Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage RD Austin, TX 78722	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED