

# 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: **12**

<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	<b>OFFICE USE ONLY</b>
	NICKNAME	LAST	SUFFIX	
Mr. David Kauffman				Date Received
10406 Orourk Ln., Austin, TX 78739				1-17-2023
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:
<input type="checkbox"/> Change of Address	10406 Orourk Ln., Austin, TX 78739			
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	( 512 )	797-0192		
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #
	NICKNAME	LAST	SUFFIX	Amount \$
Mrs. Aileen Passariello-McAleer				Date Processed
				1-17-2023
				Date Imaged

**7** CAMPAIGN TREASURER ADDRESS (Residence or Business)  
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY: STATE: ZIP CODE  
7317 Tanaqua Ln, Austin, TX 78739

**8** CAMPAIGN TREASURER PHONE  
AREA CODE PHONE NUMBER EXTENSION  
( 917 )445-5000

**9** REPORT TYPE

January 15     30th day before election     Runoff     15th day after campaign treasurer appointment (Officeholder Only)

July 15     8th day before election     Exceeded Modified Reporting Limit     Final Report (Attach C/OH - FR)

**10** PERIOD COVERED  
Month Day Year Month Day Year  
07 / 13 / 2022 THROUGH 12 / 31 / 2022

**11** ELECTION  
ELECTION DATE: Month Day Year    ELECTION TYPE

11 / 8 / 2022     Primary     Runoff     Other Description

General     Special

**12** OFFICE OFFICE HELD (if any) **13** OFFICE SOUGHT (if known)  
School Board Trustee

**14** 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.

Additional Pages

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

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

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

<b>15 C/OH NAME</b> David Kauffman		<b>16 Filer ID</b> (Ethics Commission Filers)
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2158.28
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 61.13
	4. TOTAL POLITICAL EXPENDITURES	\$ 475.51
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2594.49
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1000.00

**18 SIGNATURE** 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.

*David Kauffman*

Signature of Candidate or Officeholder

**Please complete either option below:**

**(1) Affidavit**

NOTARY STAMP / SEAL

Sworn to and subscribed before me by \_\_\_\_\_ 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

OR

**(2) Unsworn Declaration**

My name is David Kauffman, and my date of birth is 12/21/1969  
 My address is 10406 Orourk Ln., Austin TX 78739 USA  
(street) (city) (state) (zip code) (country)  
 Executed in Travis County, State of Texas, on the 17th day of January, 2023.  
(month) (year)

*David Kauffman*  
Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

**FORM C/OH  
COVER SHEET PG 3**

<b>19</b> FILER NAME		<b>20</b> Filer ID (Ethics Commission Filers)
David Kauffman		
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 2219.41
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS		\$ 1000.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 414.38
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

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>7</b>
2 FILER NAME <b>David Kauffman</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>7/21/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Erin Barbier</b> 6 Contributor address; City; State; Zip Code <b>6612 Antigo Ln, Austin, TX 78739</b>	7 Amount of contribution (\$) <b>105.58</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>7/21/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Merlinda Rodriguez</b> Contributor address; City; State; Zip Code <b>9901 Woodstock Dr., Austin, TX 78753</b>	Amount of contribution (\$) <b>26.63</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>7/22/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Valerie Turullols</b> Contributor address; City; State; Zip Code <b>4701 Quicksilver Blvd., Austin, TX 78744</b>	Amount of contribution (\$) <b>26.63</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>7/23/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Suki Steinhauser</b> Contributor address; City; State; Zip Code <b>4003 Rosedale Ave., Austin, TX 78756</b>	Amount of contribution (\$) <b>105.58</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME David Kauffman		3 Filer ID (Ethics Commission Filers)
4 Date 7/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yolanda Capuchino 6 Contributor address; City; State; Zip Code 8113 Annalise Dr., Austin, TX 78744	7 Amount of contribution (\$)  63.47
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 8/2/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tahira Benevelli Contributor address; City; State; Zip Code 5725 Trelawney Ln, Austin, TX 78738	Amount of contribution (\$)  105.58
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/3/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Lussier Contributor address; City; State; Zip Code 24 Prentiss Place, Medfield, MA 02052	Amount of contribution (\$)  52.95
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/4/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janet Bohley Contributor address; City; State; Zip Code 8646 Lansdowne Ct., Indianapolis, IN 46234	Amount of contribution (\$)  21.37
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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<b>2</b> FILER NAME David Kauffman		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 8/4/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bianca Hernandez <b>6</b> Contributor address; City; State; Zip Code 11026 Slate River Ln, Houston, TX 77089	<b>7</b> Amount of contribution (\$)  105.58
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 8/4/2022	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Thaislen Perez <b>Contributor address; City; State; Zip Code</b> 19117 Rushmore St., Manor, TX 78653	<b>Amount of contribution (\$)</b>  52.95
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 8/4/2022	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Michele Rusnak <b>Contributor address; City; State; Zip Code</b> 4312 Bremner Dr., Austin, TX 78749	<b>Amount of contribution (\$)</b>  26.63
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 8/4/2022	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Thuy Nguyen <b>Contributor address; City; State; Zip Code</b> 69 Champions Ln, San Antonio, TX 78257	<b>Amount of contribution (\$)</b>  52.95
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

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# MONETARY POLITICAL CONTRIBUTIONS

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<b>2</b> FILER NAME <p style="text-align: center;">David Kauffman</p>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <p>8/4/2022</p>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="text-align: center;">Dixie Huckabee</p> <hr/> <b>6</b> Contributor address; City; State; Zip Code <p style="text-align: center;">3321 Davis Ln., Austin, TX 78745</p>	<b>7</b> Amount of contribution (\$)  <p style="text-align: center;">52.95</p>
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> <p>8/4/2022</p>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="text-align: center;">Isabel Marquez</p> <hr/> <b>Contributor address;</b> City; State; Zip Code <p style="text-align: center;">121 Bunny Trail, Kyle, TX 78640</p>	<b>Amount of contribution (\$)</b>  <p style="text-align: center;">79.26</p>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> <p>8/4/2022</p>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="text-align: center;">Jennifer Zoghby</p> <hr/> <b>Contributor address;</b> City; State; Zip Code <p style="text-align: center;">2729 Tether Trl., Austin, TX 78704</p>	<b>Amount of contribution (\$)</b>  <p style="text-align: center;">52.95</p>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> <p>8/5/2022</p>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="text-align: center;">Steven Neptune</p> <hr/> <b>Contributor address;</b> City; State; Zip Code <p style="text-align: center;">9699 E. Prentice Circle, Greenwood Village, CO 80111</p>	<b>Amount of contribution (\$)</b>  <p style="text-align: center;">105.58</p>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

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<b>2</b> FILER NAME <b>David Kauffman</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>8/5/2022</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Patricia Detrich</b> <hr/> <b>6</b> Contributor address; City; State; Zip Code <b>6713 Blissfield Dr., Austin, TX 78739</b>	<b>7</b> Amount of contribution (\$)  <b>16.11</b>
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> <b>8/14/2022</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Alicia Emr</b> <hr/> <b>Contributor address; City; State; Zip Code</b> <b>12513 Ondara Dr., Austin, TX 78739</b>	<b>Amount of contribution (\$)</b>  <b>105.58</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> <b>8/19/2022</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jill Ramirez</b> <hr/> <b>Contributor address; City; State; Zip Code</b> <b>5309 Presidio Rd., Austin, TX 78745</b>	<b>Amount of contribution (\$)</b>  <b>105.58</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> <b>8/23/2022</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mollie Tower</b> <hr/> <b>Contributor address; City; State; Zip Code</b> <b>40 N IH 35, Apt. 11D1, Austin, TX 78701</b>	<b>Amount of contribution (\$)</b>  <b>52.95</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>7</b>
2 FILER NAME <b>David Kauffman</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/7/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kevin Heyburn</b> 6 Contributor address; City; State; Zip Code <b>3811 Avenue H, Austin, TX 78751</b>	7 Amount of contribution (\$) <b>210.84</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>9/12/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Shelli Kregel</b> Contributor address; City; State; Zip Code <b>3300 Winding Creek Dr., Austin, TX 78735</b>	Amount of contribution (\$) <b>105.58</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>8/4/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jose Martin Ramirez</b> Contributor address; City; State; Zip Code <b>1200 Barton Hills Dr., Apt 317, Austin, TX 78704</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>8/5/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Caroline Chase</b> Contributor address; City; State; Zip Code <b>6915 La Salle Dr., Austin, TX 78723</b>	Amount of contribution (\$) <b>25.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME <b>David Kauffman</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>10/1/2022</b>	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <b>C00027342</b> ) <b>International Brotherhood of Electrical Workers PAC</b>	7 Amount of contribution (\$)  <b>400.00</b>
6 Contributor address; City; State; Zip Code <b>900 Seventh St. NW, Washington, DC 20001</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input type="checkbox"/> 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**  
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# LOANS

# SCHEDULE E

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E: **1**

2 FILER NAME

David Kauffman

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan  
7/13/2022

7 Name of lender  out-of-state PAC (ID#: \_\_\_\_\_ )  
David Kauffman

9 Loan Amount (\$)  
1000.00

6 Is lender a financial institution?  
Y  N

8 Lender address; City; State; Zip Code  
10406 Orourk Ln., Austin, TX 78739

10 Interest rate  
N/A  
11 Maturity date  
N/A

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

none

15

Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

not applicable

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender  out-of-state PAC (ID#: \_\_\_\_\_ )

Loan Amount (\$)

Is lender a financial institution?  
Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

none

Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

not applicable

Principal Occupation (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

### 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: <b>1</b>	2 FILER NAME <b>David Kauffman</b>	3 Filer ID (Ethics Commission Filers)
--	---------------------------------------	---------------------------------------

4 Date <b>8/18/2022</b>	5 Payee name <b>Worley Printing</b>
----------------------------	--

6 Amount (\$) <b>113.66</b>	7 Payee address; <b>3217 N I35 Frontage Rd, Austin, TX 78722</b>	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Printing Expense</b>	(b) Description <b>Business Cards</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>9/8/2022</b>	Payee name <b>Worley Printing</b>
-------------------------	--------------------------------------

Amount (\$) <b>62.24</b>	Payee address; <b>3217 N I35 Frontage Rd, Austin, TX 78722</b>	City;	State;	Zip Code
-----------------------------	---	-------	--------	----------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Printing Expense</b>	Description <b>Posters</b>
	<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 <b>11/9/2022</b>	Payee name <b>BJ's Restaurant</b>
--------------------------	--------------------------------------

Amount (\$) <b>238.48</b>	Payee address; <b>5207 Brodie Ln. #300, Sunset Valley, TX 78745</b>	City;	State;	Zip Code
------------------------------	--	-------	--------	----------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Event Expenses</b>	Description <b>Election Night Watch Party</b>
	<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**