

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	2 Total pages filed: 12
3 CANDIDATE / OFFICEHOLDER NAME	MS (MRS) MR FIRST MI Kathryn A	OFFICE USE ONLY Date Received 4/3/19 Scraper	
	NICKNAME LAST SUFFIX Pantelion-Parker		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 3600 Posse Trail Leander, TX 78641		Date Hand-delivered or Date Postmarked
			Receipt # Amount
			Date Processed
			Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Jose J.		
	NICKNAME LAST SUFFIX Uyrea		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1720 Mira Vista Leander TX 78641		
7 CAMPAIGN TREASURER PHONE	AREA CODE 512	PHONE NUMBER 567	EXTENSION 4647
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year Month Day Year 01/11/2019 THROUGH 03/25/2019		
10 ELECTION	ELECTION DATE Month Day Year 05/04/2019		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Leander City Council Place 1

GO TO PAGE 2

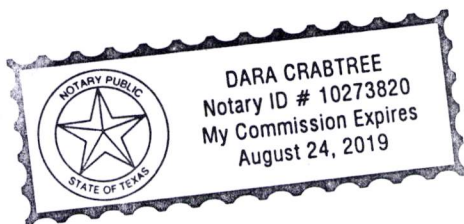
CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

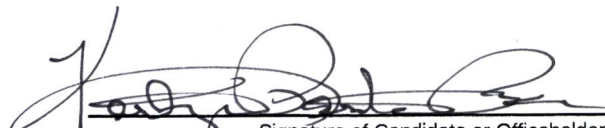
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13 C / OH NAME Urrea, Jose		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 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)	\$ 9,570.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 3,579.77
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,990.23
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 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 of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kathryn Bontalio Parker, this the 3 day of April, 2019, to certify which, witness my hand and seal of office.

Dara Crabtree Dara Crabtree Notary/City Secretary
Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

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18 FILER NAME Urrea, Jose		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 9,570.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,579.77
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES 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: Sch: 1/4 Rpt: 4/12
2 FILER NAME Urrea, Jose		3 Filer ID
4 Date 03/01/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Family Shinoak 6 Contributor address; City; State; Zip Code P.O. Box 9190 Austin, TX 78766	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Unknown		9 Employer (See Instructions) Unknown
Date 03/19/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cash, Cash Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/19/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cash, Cash Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/19/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cash, Cash Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/06/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Emily J. Contributor address; City; State; Zip Code 3103 Madisina Drive Cedar Park, TX 78641-2639	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 5/12
2 FILER NAME Urrea, Jose		3 Filer ID
4 Date 02/20/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzgerald, Diana & Thomas <hr/> 6 Contributor address; City; State; Zip Code 3500 High Horse Leander, TX 78641	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Unknown		9 Employer (See Instructions) Unknown
Date 03/19/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Aaron <hr/> Contributor address; City; State; Zip Code 4313 Fairfax Ave Dallas, TX 75205	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Unknown
Date 03/19/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kotrla MD, Kathryn J <hr/> Contributor address; City; State; Zip Code 22974 Nameless Rd Leander, TX 78641-7605	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Unknown
Date 03/01/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, John C <hr/> Contributor address; City; State; Zip Code 3839 Bee Cave Rd Austin, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Unknown
Date 03/01/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mischer, Walter & Leila <hr/> Contributor address; City; State; Zip Code 9 Greenway PLaza, Suite 2900 Houston, TX 77046	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/12
2 FILER NAME Urrea, Jose		3 Filer ID
4 Date 03/19/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pleuthner, John W. <hr/> 6 Contributor address; City; State; Zip Code 3508 Far West Austin, TX 78731	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Unknown		9 Employer (See Instructions) Unknown
Date 02/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Stronger PAC <hr/> Contributor address; City; State; Zip Code 3550 Lakeline Blvd Leander, TX 78641	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 03/19/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Cheryl <hr/> Contributor address; City; State; Zip Code 3602 Lajitas Leander, TX 78641	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 02/14/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urrea M.D., Dr. Melissa (Dr.) <hr/> Contributor address; City; State; Zip Code 1720 Mira Vista Leander, TX 78641	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Unknown
Date 03/06/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virissimo, Robert & Odette <hr/> Contributor address; City; State; Zip Code 805 Brave Face Street Leander, TX 78641	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 7/12
2 FILER NAME Urrea, Jose		3 Filer ID
4 Date 03/01/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, C & A 6 Contributor address; City; State; Zip Code 5312 Park Hollow Lane Austin, TX 78746-1250	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Developer		9 Employer (See Instructions) Unknown
Date 03/01/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, J Sam Contributor address; City; State; Zip Code 3939 Bee Cave Rd., Bldg C100 Austin, TX 78746-6429	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 03/19/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Your Tax Guy Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 8/12		2 FILER NAME Urrea, Jose		3 Filer ID	
4 Date 02/21/2019		5 Payee name DCS Dirt Cheap Signs			
6 Amount (\$) \$1,596.04		7 Payee address; City; State; Zip Code 7301 Bar K Ranch Rd Lago Vista, TX 78645			
8 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 18x24 Double Sided Sign and 4'x6' Double sided signs	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/12/2019		Payee name Minuteman Press			
Amount (\$) \$85.52		Payee address; City; State; Zip Code 715 Discovery Blvd #401 Cedar Park, TX 78613			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing 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 Business Cards	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/15/2019		Payee name Minuteman Press			
Amount (\$) \$261.64		Payee address; City; State; Zip Code 715 Discovery Blvd #401 Cedar Park, TX 78613			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing 5x7 Post cards	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/5 Rpt: 9/12	2 FILER NAME Urrea, Jose	3 Filer ID
4 Date 03/22/2019	5 Payee name Minuteman Press	
6 Amount (\$) \$179.18	7 Payee address; City; State; Zip Code 715 Discovery Blvd #401 Cedar Park, TX 78613	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/13/2019	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$97.40	Payee name Office Max Payee address; City; State; Zip Code Unknown Cedar Park, TX 78613	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Office supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/18/2019	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$285.00	Payee name Office Max Payee address; City; State; Zip Code Unknown Cedar Park, TX 78613	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Office supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/5 Rpt: 10/12		2 FILER NAME Urrea, Jose		3 Filer ID
4 Date 03/19/2019		5 Payee name Office Max		
6 Amount (\$) \$10.81		7 Payee address; City; State; Zip Code Unknown Cedar Park, TX 78613		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Office Supplies/Name Tag
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 02/27/2019		Payee name Prosperity Bank		
Amount (\$) \$39.15		Payee address; City; State; Zip Code 650 E Whitestone Blvd Cedar Park, TX 78613		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing 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 Checks with deposit slips
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 03/17/2019		Payee name Starbucks Coffee		
Amount (\$) \$6.68		Payee address; City; State; Zip Code Unknown TX		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Coffee for Meet and Greet
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/5 Rpt: 11/12	2 FILER NAME Urrea, Jose	3 Filer ID
4 Date 03/04/2019	5 Payee name The Home Depot	
6 Amount (\$) \$6.91	7 Payee address; City; State; Zip Code 2700 Whitestone Blvd Cedar Park, TX 78613	
8 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 Hardware for yard signs
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/13/2019	Candidate/Officeholder name VistaGo Print LLC	Office sought Office held
Amount (\$) \$878.99	Payee address; City; State; Zip Code Unknown Unknown, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printed Material
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/13/2019	Candidate/Officeholder name Walden Leander	Office sought Office held
Amount (\$) \$100.00	Payee address; City; State; Zip Code Unknown Unknown, TX	
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 Photographic/Head Shots
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 12/12	2 FILER NAME Urrea, Jose	3 Filer ID
4 Date 03/14/2019	5 Payee name Wix.Com	
6 Amount (\$) \$17.50	7 Payee address; City; State; Zip Code Unknown, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Web site development	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web Services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/15/2019	Payee name Wix.Com	
Amount (\$) \$14.95	Payee address; City; State; Zip Code Unknown TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Web development	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online web site services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held