

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: **10**

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
Richard
NICKNAME LAST SUFFIX
Dick Lavine

OFFICE USE ONLY

Date Received

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
Austin, TX 78704

RECEIVED

By Travis Central Appraisal District at 4:34 pm, Apr 26, 2024

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 636-8814

Date Hand-delivered or Date Postmarked

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
Lousia
NICKNAME LAST SUFFIX
Keeler

Receipt # Amount \$

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
1007 Milam Place Austin, TX 78704

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 496-0978

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
3 / 26 / 24 THROUGH 4 / 24 / 24

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff Other Description
5 / 4 / 24 General Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Travis Central Appraisal District Board, Place 3

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.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

15 C/OH NAME Dick Lavine		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5,853.34
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,393.82
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 13,024.34
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.

Dick Lavine

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 _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Dick Lavine

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,853.34
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2,400.04
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	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: 10

2 FILER NAME
Dick Lavine

3 Filer ID (Ethics Commission Filers)

4 Date
03/26/2024

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

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78729

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/27/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Galveston TX 77554

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/27/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78731

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/28/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78752

50.00

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

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1 Total pages Schedule A1: 10

2 FILER NAME
Dick Lavine

3 Filer ID (Ethics Commission Filers)

4 Date
04/02/2024

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

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78731

25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/02/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78751

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/02/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78703

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/03/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78757

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1: 10

2 FILER NAME
Dick Lavine

3 Filer ID (Ethics Commission Filers)

4 Date
04/03/2024

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

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78704

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/03/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78703

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/04/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78733

400.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/05/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78703

150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1: 10

2 FILER NAME
Dick Lavine

3 Filer ID (Ethics Commission Filers)

4 Date
04/07/2024

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

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78751

25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/08/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78731

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/08/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Brownfield ME 04010-4425

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/09/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Dripping Springs TX 78620

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1: 10

2 FILER NAME
Dick Lavine

3 Filer ID (Ethics Commission Filers)

4 Date
04/09/2024

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

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
[REDACTED] Santa Fe NM 87501

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/10/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78702-1111

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/10/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78704-1861

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/11/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78763

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1: 10

2 FILER NAME
Dick Lavine

3 Filer ID (Ethics Commission Filers)

4 Date
04/12/2024

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

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78746

250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/13/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78757

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/13/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78704

400.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/13/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78731

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1: 10

2 FILER NAME
Dick Lavine

3 Filer ID (Ethics Commission Filers)

4 Date
04/14/2024

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

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78751

25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/16/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78704

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/16/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78758

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/16/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78705

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1: 10

2 FILER NAME
Dick Lavine

3 Filer ID (Ethics Commission Filers)

4 Date
04/18/2024

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

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78726

25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/18/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78714

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/18/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78703

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/19/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78757

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1: 10

2 FILER NAME
Dick Lavine

3 Filer ID (Ethics Commission Filers)

4 Date
04/19/2024

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

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78704

35.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/21/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78739

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/21/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78704

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/22/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78746

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1: 10

2 FILER NAME
Dick Lavine

3 Filer ID (Ethics Commission Filers)

4 Date
04/22/2024

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

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
[REDACTED] San Francisco CA 94111

10.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/24/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Berkeley CA 94710

8.34

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/26/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78757

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/10/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78703

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1: 10

2 FILER NAME
Dick Lavine

3 Filer ID (Ethics Commission Filers)

4 Date
04/11/2024

5 Full name of contributor out-of-state PAC (ID#: _____)
Lloyd Doggett for Congress

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78702

250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/23/2024

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code
[REDACTED] Austin TX 78757

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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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: 1	2 FILER NAME Dick Lavine	3 Filer ID (Ethics Commission Filers)
4 Date 04/24/2024	5 Payee name ActBlue	
6 Amount (\$) 193.91	7 Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Online Contribution Processing Fee
	(c) Check if travel outside of Texas. Complete Schedule T. 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
Date 04/22/2024	Payee name Austin Chronicle	
Amount (\$) 1,650.00	Payee address; City; State; Zip Code 1000 E. 40th St. Austin, TX 78751	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Newspaper Advertisement
	Check if travel outside of Texas. Complete Schedule T. 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 04/23/2024	Payee name Worley Printing	
Amount (\$) 549.91	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) Advertising Expense	Description Pushcards
	Check if travel outside of Texas. Complete Schedule T. 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