

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

9556

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID sheri@sherifortexas.com	2 Total pages filed: 11	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Sheri	MI	OFFICE USE ONLY FILED FOR RECORD 2020 FEB -3 PM 11:48 DANA DEBEAUX COUNTY CLERK TRAVIS COUNTY TEXAS
	NICKNAME	LAST Soltes	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	Date Received
	4803 Rutherglen Drive			Date Hand-Delivered or Date Postmarked
	Austin, TX 78749-3744			Receipt #
				Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST MICHAEL	MI H	
	NICKNAME	LAST HOGAN	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE; ZIP CODE
	2525 Wallingwood Drive	6-602	Austin	TX 78746
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	512	328 - 2094		
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	01	2020	THROUGH 01/23/2020
10 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month	Day	Year	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
	03	03	2020	
11 OFFICE	OFFICE HELD (if any) None		12 OFFICE SOUGHT (if known) Democratic Candidate for Travis County Commissioner Pct. 3 Place Pct 3 District Travis Co	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2 of 11

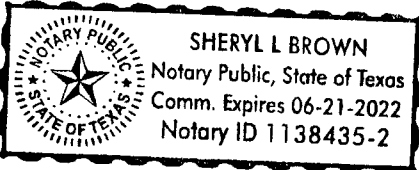
13 C / OH NAME Soltes, Sheri	14 Filer ID sheri@sherifortexas.com
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15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <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.		
<input type="checkbox"/> Additional Pages <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

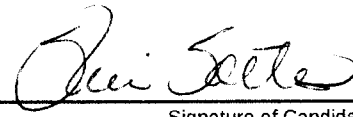
16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,315.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	8,862.99
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	2,253.81
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	10,000.00

17 AFFADAVIT

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.

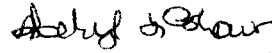


AFFIX NOTARY STAMP / SEAL ABOVE



Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said SHERYL SOLTES, this the 30th day of JANUARY, 20 20, to certify which, witness my hand and seal of office.



Signature of officer administering

SHERYL BROWN
Printed name of officer administering

NOTARY
Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Soltes, Sheri	19 Filer ID sheri@sherifortexas.com
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,315.00	
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	\$ 8,862.99	
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: 4/11

2 FILER NAME

Soltes, Sheri

3 Filer ID

sheri@sherifortexas.com

4 Date
01/04/2020

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

7 Amount of Contribution (\$)

\$25.00

6 Contributor address; City; State; Zip Code

6601 Mira Loma Ln

Austin, TX 78723

8 Principal occupation / Job title (See Instructions)

Financial Manager

9 Employer (See Instructions)

City of Austin

Date
01/15/2020

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

Amount of Contribution (\$)

\$50.00

Contributor address; City; State; Zip Code

7308 Red Pebble Road

Austin, TX 78739

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Not Employed

Date
01/03/2020

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

Amount of Contribution (\$)

\$10.00

Contributor address; City; State; Zip Code

7308 Red Pebble Rd.

Austin, TX 78739

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Not Employed

Date
01/06/2020

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

Amount of Contribution (\$)

\$50.00

Contributor address; City; State; Zip Code

418 Marina Village Cove

Austin, TX 78734

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Not Employed

Date
01/11/2020

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

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

2107 Woodmont Ave

Austin, TX 78703

Principal occupation / Job title (See Instructions)

Not employed

Employer (See Instructions)

Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 5/11
2 FILER NAME Soltes, Sheri		3 Filer ID sheri@sherifortexas.com
4 Date 01/04/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haag, Stefan	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 6302 Mesa Grande Dr. Austin, TX 78749		
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Austin Community College
Date 01/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Amy	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 6720 Rotan Drive Austin, TX 78749		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keane, Peter	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code 4712 Page St Austin, TX 78723		
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Esty
Date 01/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kush, Rebecca	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1500 Wild Basin Ledge Austin, TX 78746		
Principal occupation / Job title (See Instructions) Clinical Research		Employer (See Instructions) Elligo
Date 01/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levinson, Cynthia	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 3410 WINDSOR RD AUSTIN, TX 78703		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/11
2 FILER NAME Soltes, Sheri		3 Filer ID sheri@sherifortexas.com
4 Date 01/19/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liedeker, Eileen 6 Contributor address; City; State; Zip Code 6102 Highland Hills Drive Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Littman, Robin Contributor address; City; State; Zip Code 12359 Longworth Lane Houston, TX 77024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luciano, Richard Contributor address; City; State; Zip Code 2500 Greenlee Dr Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Cattle Rancher		Employer (See Instructions) R2 Ranch LLC
Date 01/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCreary, Lou Contributor address; City; State; Zip Code 1108 Snowy Owl Ct Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Self employed
Date 01/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Penn, Gary Contributor address; City; State; Zip Code 1800 Lavaca St. # 214 Austin, TX 78701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 7/11
2 FILER NAME Soltes, Sheri		3 Filer ID sheri@sherifortexas.com
4 Date 01/03/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Caroline 6 Contributor address; City; State; Zip Code 2103 Cypress Point East Austin, TX 78746	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swenson, Karen Contributor address; City; State; Zip Code 2012 Antone Street Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 01/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Susan Contributor address; City; State; Zip Code PO Box 341898 Austin, TX 78734	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Texas Service Life
Date 01/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Traugott, Alexander Contributor address; City; State; Zip Code 6207 Back Bay Lane Austin, TX 78739	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Charles Schwab & Co. Inc.
Date 01/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, William Contributor address; City; State; Zip Code 2203 Big Horn Dr Austin, TX 78734	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Hempliance

POLITICAL EXPENDITURES 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: Sch: 1/4 Rpt: 8/11	2 FILER NAME Soltes, Sheri	3 Filer ID sheri@sherifortexas.com
4 Date 01/22/2020	5 Payee name Austin Chronicle	
6 Amount (\$) \$725.00	7 Payee address; City; State; Zip Code 4000 N I H 35 Austin, TX 78751	
8 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 meal
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/06/2020	Candidate/Officeholder name Briscoe, Sean	
Amount (\$) \$1,000.00	Office sought Office held	
	Payee name Briscoe, Sean	
	Payee address; City; State; Zip Code 6910 Twin Crest Dr Austin, TX 78752	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/06/2020	Candidate/Officeholder name Briscoe, Sean	
Amount (\$) \$300.00	Office sought Office held	
	Payee name Briscoe, Sean	
	Payee address; City; State; Zip Code 6910 Twin Crest Dr Austin, TX 78752	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 consulting
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 | 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: Sch: 2/4 Rpt: 9/11	2 FILER NAME Soltes, Sheri	3 Filer ID sheri@sherifortexas.com
4 Date 01/06/2020	5 Payee name Briscoe, Sean	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 6910 Twin Crest Dr Austin, TX 78752	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/13/2020	Payee name Chen's Noodle House	
Amount (\$) \$30.25	Payee address; City; State; Zip Code 8650 Spicewood Springs Rd #127 Austin, TX 78759	
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 meal
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/06/2020	Payee name County Line	
Amount (\$) \$63.09	Payee address; City; State; Zip Code 6500 W. Bee Cave Rd. Austin, TX 78746	
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 meal
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 | 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: Sch: 3/4 Rpt: 10/11	2 FILER NAME Soltes, Sheri	3 Filer ID sheri@sherifortexas.com
4 Date 01/21/2020	5 Payee name Mikado Ryotei	
6 Amount (\$) \$24.65	7 Payee address; City; State; Zip Code 9033 Research Blvd #100 Austin, TX 78758	
8 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 meal
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 01/11/2020	Payee name Rouser LLC	
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 9009 N FM 620 #1803 Austin, TX 78749	
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 video
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 01/01/2020	Payee name Streamlined Analytics LLC	
Amount (\$) \$195.00	Payee address; City; State; Zip Code 6718, Silvermine Dr. Austin, TX 78736	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 data analysis
	9 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 | 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: Sch: 4/4 Rpt: 11/11	2 FILER NAME Soltes, Sheri	3 Filer ID sheri@sherifortexas.com
4 Date 01/05/2020	5 Payee name Streamlined Analytics LLC	
6 Amount (\$) \$1,600.00	7 Payee address; City; State; Zip Code 6718, Silvermine Dr. Austin, TX 78736	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 data analysis
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date 01/06/2020	Candidate/Officeholder name Office sought Office held	
Payee name Streamlined Analytics LLC		
Amount (\$) \$925.00	Payee address; City; State; Zip Code 6718, Silvermine Dr. Austin, TX 78736	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 data analysis
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Candidate/Officeholder name Office sought Office held		