CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	iuide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 30
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Laura	MI	OFFICE USE ONLY
IVAIVIE	NICKNAME LAST Miller	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS		eity; state; zip code Pallas TX 75219	
Change of Address			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (214) 378 1000	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST	MI	Receipt # Amount \$
NAME	Mr Doug		Date Processed
	Deason		Date Imaged
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SU 5956 Sherry Lane 800	DITE #; CITY; STATE; Dallas TX 75225	ZIP CODE
(Residence or Business)			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (214) 415 0957	EXTENSION	
9 REPORT TYPE	January 15 30th day before el	ection Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	X July 15 8th day before elec	ction Exceeded \$500 limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 04 / 25 / 2019	THROUGH 06	Day Year 30 2019
11 ELECTION	Month Day Year Primary 05 / 04 / 2019 X General	Runoff Other Description Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Council District 13	
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME				15 Filer ID (Ethics Commission F	ilers)
Laura Miller					
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
	SPECIFIC	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN T	REASURER NAME		
Additional Pages					
		COMMITTEE CAMPAIGN 1	TREASURER ADDRESS		
17 CONTRIBUTION TOTALS			ONS OF \$50 OR LESS (OTHER TH ITEES OF LOANS), UNLESS ITEMI		
		POLITICAL CONTRIBUTION PLEDGES, LOANS	UTIONS S, OR GUARANTEES OF LOANS)	\$ 1013.33	
EXPENDITURE TOTALS	3. TOTAL F	\$ 0.00			
	4. TOTAL POLITICAL EXPENDITURES \$ 60382.14				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 68			\$ 68798.13	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF AY OF THE REPORTING	ALL OUTSTANDING LOANS AS OF PERIOD	* 0.00	
18 AFFIDAVIT			I swear, or affirm, under penalty of true and correct and includes all infunder Title 15, Election Code.		
			ELECTRONICALLY	CERTIFIED	
			Signature of Car	ndidate or Officeholder	
AFFIX NOTARY STAM	P/SEALABOVE				
Sworn to and subsc	ribed before me, k	oy the said Laura Mi	ller	, this the _15th	
			ess my hand and seal of office		
Signature of officer a	administering oath	Printed name of	officer administering oath	Title of officer administerin	g oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	19 FILER NAME Laura Miller 20 Filer ID (Ethics Cor			mmission Filers)	
21	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE				
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 750.00	
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 263.33	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00	
4.	4. SCHEDULE E: LOANS			\$ 0.00	
5.	5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			\$ 47,303.73	
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			\$ 0.00	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			\$ 0.00	
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			\$ 13,078.41	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			\$ 0.00	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			\$ 0.00	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			\$ 0.00	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT RETURNED TO FILER	IONS	\$ 0.00	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 1 of 1
2 FILER NAME Laura Miller	3 Filer ID (Ethics Commission Filers)
4 Date 04/25/2019 5 Full name of contributor out-of-state PAC (ID#:	500.00 Code
Date Full name of contributor Out-of-state PAC (ID#:	250.00 Code
Principal occupation / Job title (See Instructions) Em	ployer (See Instructions)
Date Full name of contributor □ out-of-state PAC (ID#: Contributor address; City; State; Zip of	γιιου οι σοικισσιοι (φ)
Principal occupation / Job title (See Instructions) Em	ployer (See Instructions)
Date Full name of contributor out-of-state PAC (ID#: Contributor address; City; State; Zip 0	
Principal occupation / Job title (See Instructions)	ployer (See Instructions)
ATTACH ADDITIONAL CODIES OF THIS	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

Th	ne Instruction Guide explains how to complete this form	n.	1 Total pages Sche	
2 FILER NAME Laura Miller			3 Filer ID (Ethics (Commission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$	
5 Date 6 Full name of contributor □ out-of-state PAC (ID#:) 04/29/2019 Allan and Claire Cross 7 Contributor address; City; State; Zip Code 3990 Shady Hill Drive Dallas, TX 75229			Contribution \$ 103.86	9 In-kind contribution description Food/drink for 4/27/19 meet/greet event.
10 Principal occ	rupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDIC	CIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR c	UDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	of contributor's spo	use (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 04/29/2019	Full name of contributor	de		In-kind contribution description Food/nametags for 4/27/19 event. side of Texas. Complete Schedule T.
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDIC	CIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR c	IUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
	ATTACH ADDITIONAL CODIES OF T	THIS SCHEDI	II E AS NEEDED	
	ATTACH ADDITIONAL COPIES OF 1	THIS SCHEDU	JLE AS NEEDED	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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

Candidate/Officeholder/Politica	al Committee Legal Services Salarie	s/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how t	o complete this form.	
1 Total pages Schedule F1: 1 of 7	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)
4 Date 04/25/2019	5 Payee name John Pritchett		
6 Amount (\$) 423.20	7 Payee address; City; State; Zip Code P.O. Box 12192 Dallas, TX 75225	·	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Check if Austi	outside of Texas. Complete Schedule T. in, TX, officeholder living expense shments 3/7fundraiser
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name H	Office sought	Office held
Date 04/28/2019	Payee name The Order Desk		
Amount (\$) 1277.35	Payee address; City; State; Zip Code 9840 Monroe St., #104 Dallas, TX 75220)	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Mailing Services		utside of Texas. Complete Schedule T. n, TX, officeholder living expense campaign fliers
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 05/01/2019	Payee name Bojorquez Law Firm		
Amount (\$) 4795.00	Payee address; City; State; Zip Code 12325 Hymeadow Dr, 2-Mitin, TX 78750	·	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Legal Services		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF TH	IS SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 2 of 7	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)
4 Date 05/03/2019	5 Payee name Graphics Management		
6 Amount (\$) 5966.43	7 Payee address; City; State; Zip Code 9322 Moss Trail Dallas, TX 75231		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		side of Texas. Complete Schedule T. TX, officeholder living expense age for 2 fliers
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 05/03/2019	Payee name Graphics Management		
Amount (\$) 12500.00	Payee address; City; State; Zip Code 9322 Moss Trail Dallas, TX 75231		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		side of Texas. Complete Schedule T. TX, officeholder living expense aign
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 05/03/2019	Payee name Graphics Management		
Amount (\$) 433.00	Payee address; City; State; Zip Code 9322 Moss Trail Dallas, TX 75231		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	
1 Total pages Schedule F1: 3 of 7	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)
4 Date 05/03/2019	5 Payee name Graphics Management	'	
6 Amount (\$) 7301.08	7 Payee address; City; State; Zip Code 9322 Moss Trail Dallas, TX 75231		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. I, TX, officeholder living expense campaign fliers
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 05/06/2019	Payee name Texas Jewish Post		
Amount (\$) 750.00	Payee address; City; State; Zip Code 7920 Belt Line Rd, #680 Dallas, TX 75254		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense a ad
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 05/08/2019	Payee name Bachman Transfer Station		
Amount (\$) 50.88	Payee address; City; State; Zip Code 9500 Harry Hines Blvd. Dallas, TX 75220		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 4 of 7	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)
4 Date 05/08/2019	5 Payee name Valentine Direct Marketing LLC		
6 Amount (\$) 1001.31	7 Payee address; City; State; Zip Code 2344 Farrington Dallas, TX 75207		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		utside of Texas. Complete Schedule T.
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 05/14/2019	Payee name Jared Yun		
Amount (\$) 283.84	Payee address; City; State; Zip Code 5453 Ellsworth Ave. Dallas, TX 75206		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense /removal
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 05/17/2019	Payee name Colten Schwalbe		
Amount (\$) 316.75	Payee address; City; State; Zip Code 5555 E. Mockingbird Ln DM las, TX 75206		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense /removal
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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

Candidate/Officeholder/Politica	al 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: 5 of 7	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)
4 Date 05/17/2019	5 Payee name Kenneth Oostman		
6 Amount (\$) 234.51	7 Payee address; City; State; Zip Code 5201 Amesbury Dr, 121 Dallas, TX 75206		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense n/removal
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 05/17/2019	Payee name Henry Johnstone		
Amount (\$) 971.28	Payee address; City; State; Zip Code 5555 E. Mockingbird Ln DM las, TX 75206		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense n/removal
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 05/17/2019	Payee name Lilly and Company		
Amount (\$) 2000.00	Payee address; City; State; Zip Code 1005 Congress Ave, 400 Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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: 6 of 7	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)	
4 Date 06/28/2019	5 Payee name Cindy Sivinski			
6 Amount (\$) 2000.00	7 Payee address; City; State; Zip Code 2505 Lake Ridge Rd Red Oak, TX 75154			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense crvices	
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name H	Office sought	Office held	
Date 05/28/2019	Payee name Chevron			
Amount (\$) 64.33	Payee address; City; State; Zip Code 8424 Preston Rd. Dallas, TX 75225			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		ntside of Texas. Complete Schedule T. I, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date 06/06/2019	Payee name Kenny Oostman			
Amount (\$) 25.00	Payee address; City; State; Zip Code 5301 Amesbury Dr, 121 Dallas, TX 75206			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T. 1, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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

Credit Card Payment	-	s Salaries/v	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 7 of 7	2 FILER NAME Laura Miller			3 Filer ID (Ethics Commission Filers)
4 Date 05/08/2019	5 Payee name Citibank Mastercard			
6 Amount (\$) 1734.55	7 Payee address; P.O. Box 78045	City; State; Zip Code Phoenix, AZ 85062		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categorie Credit Card Payment	s listed at the top of this schedule)		utside of Texas. Complete Schedule T. n, TX, officeholder living expense ard expenditures
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officehold	older name	Office sought	Office held
Date 05/25/2019	Payee name Visa Signature			
Amount (\$) 3721.39	Payee address; P.O. Box 851001	City; State; Zip Code Dallas, TX 75285		
PURPOSE OF EXPENDITURE	Category (See Categorie Credit Card Payment	s listed at the top of this schedule)		tside of Texas. Complete Schedule T. , TX, officeholder living expense ard expenditures
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeho	older name	Office sought	Office held
Date 05/28/2019	Payee name Citibank Mastercard			
Amount (\$) 1453.83	Payee address; P.O. Box 78045	City; State; Zip Code Phoenix, AZ 85062		
PURPOSE OF EXPENDITURE	Category (See Categorie Credit Card Payment	s listed at the top of this schedule)		tside of Texas. Complete Schedule T. , TX, officeholder living expense ard expenditures
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeh	older name	Office sought	Office held
	ATTACH ADDI	TIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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 (orders extension and listed phone)

Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above) The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F4: 1 of 18	2 FILER NAME Laura Miller	3 Filer ID (Ethics Commission Filers)		
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	IT CARD \$		
5 Date 05/14/2019	6 Payee name Dr. Delphinium			
7 Amount (\$) 297.58				
9 TYPE OF EXPENDITURE	X Political Non-Politica	I		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign thank you gifts		
11 Complete ONLY if direct candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
Date 06/03/2019	Payee name Philip Kingston Campaign			
Amount (\$) 1000.00	Payee address; City; State; Zip Code 5901 Palo Pinto Dallas, TX 75206			
TYPE OF EXPENDITURE	X Political Non-Politica	al		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder Political Committee	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contribution		
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Contributions/Donations Made B Candidate/Officeholder/Politica		/Contract Labor	Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F4: 2 of 18	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	IT CARD	\$
5 Date 06/03/2019	6 Payee name Scott Griggs Campaign		
7 Amount (\$) 5000.00	8 Payee address; City; State; Zip Code P.O. Box 227176 Dallas, TX 75222		
9 TYPE OF EXPENDITURE	X Political Non-Politica	ıl	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder. Political Committee	1 =	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name Office	sought	Office held
Date 06/05/2019	Payee name Dropbox		
Amount (\$) 10.65	Payee address; City; State; Zip Code San Francisco, CA 94107		
TYPE OF EXPENDITURE	X Political Non-Politica	al	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check	on if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense ament storage monthly fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		sought	Office held
		<u> </u>	
	ATTACH ADDITIONAL COPIES OF THIS SCHI	EDULE AS NE	EEDED

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Candidate/Officeholder/Politica	,	(Contract Labor Other (enter a category not listed above)	
1 Total pages Schedule F4: 3 of 18	2 FILER NAME Laura Miller	3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	IT CARD \$	
5 Date 05/21/2019	6 Payee name Dr. Delphinium	1	
7 Amount (\$) 129.84	8 Payee address; City; State; Zip Code 5806 W. Lovers Ln Dallas, TX 75225		
9 TYPE OF EXPENDITURE	X Political Non-Politica	I	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign thank you gift	
11 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
Date 06/06/2019	Payee name Squarespace Inc.		
Amount (\$) 28.15	Payee address; City: State: Zip Code New York, NY 10014		
TYPE OF EXPENDITURE	X Political Non-Politica	al	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign website monthly fee	
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Contributions/Donations Made B Candidate/Officeholder/Politica		Contract Labor	Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F4: 4 of 18	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	IT CARD	\$
5 Date 04/29/2019	6 Payee name Suzie Cakes		
7 Amount (\$) 377.00	8 Payee address; City; State; Zip Code 6100 Luther Lane Dallas, TX 75225		
9 TYPE OF EXPENDITURE	X Political Non-Politica	I	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		f travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense
11 Complete ONLY if direct candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
Date 05/14/2019	Payee name Dropbox		
Amount (\$) 10.65 Payee address; City; State; Zip Code San Francisco, CA 94107			
TYPE OF EXPENDITURE	X Political Non-Politica	al	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check	on f travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense ment storage monthly fee
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Contributions/Donations Made B Candidate/Officeholder/Politica		Contract Labor	Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F4: 5 of 18	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	IT CARD	\$	
5 Date 05/14/2019	6 Payee name Flower Child			
7 Amount (\$) 11.91	8 Payee address; City; State; Zip Code 5450 W. Lovers Ln. Dallas, TX 75209			
9 TYPE OF EXPENDITURE	X Political Non-Politica	I		
10 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Food/Beverage Expense		travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense	
11 Complete ONLY if direct				
Date 05/14/2019	Payee name FedEx Office			
Amount (\$) 28.42	Payee address; City; State; Zip Code 6025 Royal Ln Dallas, TX 75230			
TYPE OF EXPENDITURE	X Political Non-Politica	ıl		
	Category (See Categories listed at the top of this schedule)	Descriptio	on travel outside of Texas. Complete Schedule T.	
PURPOSE OF EXPENDITURE	Printing Expense		if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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
Charge Contract Section 2018

Contributions/Donations Made B Candidate/Officeholder/Politica		/Contract Labor	Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F4: 6 of 18	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	IT CARD	\$
5 Date 05/14/2019	6 Payee name Tolltag		
7 Amount (\$) 40.00	8 Payee address; City; State; Zip Code 5900 W. Plano Pkwy Plano, TX 75093		
9 TYPE OF EXPENDITURE	X Political Non-Politica	ıl	
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description	on
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	Check	f travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense Tollway tolls
11 Complete ONLY if direct			
Date 05/14/2019	Payee name Shell		
Amount (\$) 67.01 Payee address; City; State; Zip Code 2275 W. Northwest Hwy Dallas, TX 75220			
TYPE OF EXPENDITURE	X Political Non-Politica	al	
	Category (See Categories listed at the top of this schedule)	Descripti	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense		f travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense paign travel
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Contributions/Donations Made B Candidate/Officeholder/Politica		Contract Labor Other (enter a category not listed above)	
1 Total pages Schedule F4: 7 of 18	2 FILER NAME Laura Miller	3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	TCARD \$	
5 Date 05/14/2019	6 Payee name Constant Contact		
7 Amount (\$) 111.93	8 Payee address; City; State; Zip Code 1601 Trapelo Rd Waltham, MA 02451		
9 TYPE OF EXPENDITURE	X Political Non-Politica		
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Solicitation/Fundraising Expense	Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE		Check if Austin, TX, officeholder living expense Email distribution service fees	
11 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
Date 05/14/2019	Payee name Lyft		
Amount (\$) 12.55	Payee address; City; State; Zip Code 185 Berry St. San Francisco, CA 94107		
TYPE OF EXPENDITURE	X Political Non-Politica	ıl	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign transportation	
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		sought Office held	
	ATTACH ADDITIONAL COPIES OF THIS SCHI	EDULE AS NEEDED	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wades/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District

Contributions/Donations Made B Candidate/Officeholder/Politica		Contract Labor	Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F4: 8 of 18	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	IT CARD	\$	
5 Date 05/14/2019	6 Payee name Office Depot			
7 Amount (\$) 591.11	8 Payee address; City; State; Zip Code 2220 North Hwy 360 Grand Prairie, TX 75050			
9 TYPE OF EXPENDITURE	X Political Non-Politica	I		
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description	on	
PURPOSE	Office Overhead/Rental Expense	Check if	travel outside of Texas. Complete Schedule T.	
OF EXPENDITURE			if Austin, TX, officeholder living expense artridges for printing	
11 Complete ONLY if direct				
Date 05/14/2019	Payee name Enterprise Car Rental			
Amount (\$) 274.04	Payee address; City; State: Zip Code 3133 Inwood Rd. Dallas, TX 75235			
TYPE OF EXPENDITURE	X Political Non-Politica	ıl		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Transportation Equipment & Related Expense		travel outside of Texas. Complete Schedule T.	
OF EXPENDITURE			if Austin, TX, officeholder living expense or campaign worker	
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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
Class (Applied September 1)

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/Wages	Contract Labor Other (enter a category not listed above)		
The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F4: 9 of 18	2 FILER NAME Laura Miller	3 Filer ID (Ethics Commission Filers)		
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	IT CARD \$		
5 Date	6 Payee name	<u> </u>		
05/14/2019	Exxon Mobil			
7 Amount (\$) 8.63	8 Payee address; City; State; Zip Code 10804 Preston Rd Dallas, TX 75230			
9 TYPE OF EXPENDITURE	X Political Non-Politica	I		
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE		Check if travel outside of Texas. Complete Schedule T.		
OF	Transportation Equipment & Related Expense			
EXPENDITURE		Check if Austin, TX, officeholder living expense Gas for campaign		
11 Complete ONLY if direct expenditure to benefit C/Oh	11 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 05/10/2019	Payee name Squarespace			
Amount (\$) 28.15	Payee address; City: State: Zip Code 8 Clarkson St. New York, NY 10014			
TYPE OF EXPENDITURE	X Political Non-Politica	ıl		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE		Check if travel outside of Texas. Complete Schedule T.		
OF	Solicitation/Fundraising Expense	Check if Austin, TX, officeholder living expense		
EXPENDITURE		Campaign website monthly fee		
Complete ONLY if direct expenditure to benefit C/Oh		sought Office held		
	ATTACH ADDITIONAL COPIES OF THIS SCHI	EDULE AS NEEDED		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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

Contributions/Donations Made By Candidate/Officeholder/Politica		Printing Expense Salaries/Wages/Contract Labor	Travel Out Of District Other (enter a category not listed above)
	The Instruction Guide explai	ns how to complete this form.	
1 Total pages Schedule F4: 10 of 18	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$
5 Date 05/10/2019	6 Payee name Crudo Taverna		
7 Amount (\$) 2451.36	8 Payee address; City; State; 8411 Preston Rd Dallas, TX 752		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10	(a) Category (See Categories listed at the top of the	nis schedule) (b) Description	on
PURPOSE		Checki	f travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Event Expense	Check	if Austin, TX, officeholder living expense
EXPENDITURE		Election nig	
11 Complete ONLY if direct			
Date 05/10/2019	Payee name R&D Kitchen		
Amount (\$) 235.27	Payee address; City; State; 8300 Preston Center Plz Dallas, TX 752	Zip Code 25	
TYPE OF EXPENDITURE	X Political	Non-Political	
	Category (See Categories listed at the top of the	nis schedule) Descripti	on
PURPOSE	Food/Royaraga Evpansa	Checki	f travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Food/Beverage Expense	_	if Austin, TX, officeholder living expense
EXPENDITORE		Campaign th	nank you dinner
Complete ONLY if direct			
	ATTACH ADDITIONAL COPIES (OF THIS SCHEDULE AS NE	EEDED

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Contributions/Donations Made B Candidate/Officeholder/Politica		Contract Labor	Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F4: 11 of 18	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	IT CARD	\$	
5 Date 05/10/2019	6 Payee name Homewood			
7 Amount (\$) 481.61				
9 TYPE OF EXPENDITURE	X Political Non-Politica	I		
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description	on	
PURPOSE OF	Food/Beverage Expense	Check if	travel outside of Texas. Complete Schedule T.	
EXPENDITURE			if Austin, TX, officeholder living expense ank you dinner	
11 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
Date 05/10/2019	Payee name USPS			
Amount (\$) Payee address; City; State; Zip Code 5959 Royal Lane Dallas, TX 75230				
TYPE OF EXPENDITURE	X Political Non-Politica	al		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Solicitation/Fundraising Expense		travel outside of Texas. Complete Schedule T.	
EXPENDITURE			if Austin, TX, officeholder living expense aps for postcards	
Complete <u>ONLY</u> if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Contributions/Donations Made B Candidate/Officeholder/Politica		/Contract Labor	Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F4: 12 of 18	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	IT CARD	\$	
5 Date 04/27/2019	6 Payee name Adobe			
7 Amount (\$) 25.46	8 Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110			
9 TYPE OF EXPENDITURE	X Political Non-Politica	I		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		f travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense	
11 Complete ONLY if direct candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
Date 04/27/2019	Payee name La Madeleine			
Amount (\$) 23.23 Payee address; City; State; Zip Code Dallas, TX 75205				
TYPE OF EXPENDITURE	X Political Non-Politica	al		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		f travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense	
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Contributions/Donations Made B Candidate/Officeholder/Politica		Contract Labor	Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F4: 13 of 18	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	IT CARD	\$
5 Date 04/27/2019	6 Payee name Shell	'	
7 Amount (\$) 65.08	8 Payee address; City; State; Zip Code 2275 W. Northwest Hwy Dallas, TX 75220		
9 TYPE OF EXPENDITURE	X Political Non-Political	l	
10	(a) Category (See Categories listed at the top of this schedule)	(b) Descriptio	n
PURPOSE OF	Transportation Equipment & Related Expense	Check if	travel outside of Texas. Complete Schedule T.
EXPENDITURE		Gas for camp	f Austin, TX, officeholder living expense paign travel
11 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
Date 04/27/2019	Payee name Lyft		
Amount (\$) Payee address; City; State; Zip Code 185 Berry St. San Francisco, CA 94107			
TYPE OF EXPENDITURE	X Political Non-Politica	I	
	Category (See Categories listed at the top of this schedule)	Description	on
PURPOSE	Transportation Equipment & Related Expense		travel outside of Texas. Complete Schedule T.
OF EXPENDITURE			f Austin, TX, officeholder living expense de for campaign
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gitt/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 (expense)

Contributions/Donations Made B Candidate/Officeholder/Politica		Contract Labor Other (enter a category not listed above)	
1 Total pages Schedule F4: 14 of 18	2 FILER NAME Laura Miller	3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	IT CARD \$	
5 Date 04/27/2019	6 Payee name Empire Bakery		
7 Amount (\$) 61.81	8 Payee address; City; State; Zip Code 5450 W. Lovers Lane Dallas, TX 75209		
9 TYPE OF EXPENDITURE	X Political Non-Politica	I	
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE		Check if Austin, TX, officeholder living expense Food for campaign	
11 Complete ONLY if direct candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
Date 04/27/2019	Payee name Tolltag		
Amount (\$) 40.00	Payee address; City; State: Zip Code 5900 W. Plano Pkwy Plano, TX 75093		
TYPE OF EXPENDITURE	X Political Non-Politica	d	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Transportation Equipment & Related Expense	Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE		Check if Austin, TX, officeholder living expense North Texas Tollway tolls	
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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
Charge Contract Section 2018

Contributions/Donations Made B Candidate/Officeholder/Politica		/Contract Labor	Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F4: 15 of 18	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	IT CARD	\$
5 Date 04/27/2019	6 Payee name Dropbox		
7 Amount (\$) 10.65	8 Payee address; City; State; Zip Code 333 Brannon St San Francisco, CA 94107		
9 TYPE OF EXPENDITURE	X Political Non-Politica	ıl	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check	f travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense ment storage monthly fee
11 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 04/27/2019	Payee name Southwest Airlines		
Amount (\$) 796.96	Payee address; City; State; Zip Code 2702 Love Field Dr. Dallas, TX 75235		
TYPE OF EXPENDITURE	X Political Non-Politica	al	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Check	on f travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense r roundtrip airfare to Dallas
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
	ATTACH ADDITIONAL COPIES OF THIS SCHI	EDULE AS NE	EEDED

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

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

Contributions/Donations Made By Candidate/Officeholder/Politica		Printing Expense Salaries/Wages/Contract Labor	Travel Out Of District Other (enter a category not listed above)
	The Instruction Guide explain	is how to complete this form.	
1 Total pages Schedule F4: 16 of 18	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$
5 Date 04/27/2019	6 Payee name Constant Contact		
7 Amount (\$) 111.58	8 Payee address; City; State; 1601 Trapelo Rd Waltham, MA (•	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10	(a) Category (See Categories listed at the top of thi	is schedule) (b) Description	on
PURPOSE	Advertising Expense	Check if	travel outside of Texas. Complete Schedule T.
OF EXPENDITURE			if Austin, TX, officeholder living expense pution services fees
11 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
Date 04/27/2019	Payee name Southwest Inflight Wi-Fi		
Amount (\$) 8.00	Payee address; City; State; 2702 Love Field Dr. Dallas, TX 7523	Zip Code 35	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of thi Fees	Check if	travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE AS NE	EDED

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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

Contributions/Donations Made B Candidate/Officeholder/Politica		/Contract Labor	Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F4: 17 of 18	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	IT CARD	\$
5 Date 04/27/2019	6 Payee name Square, Inc.		
7 Amount (\$) 11.71	8 Payee address; City; State; Zip Code 1455 Market Square, #600 San Francisco, CA 94103		
9 TYPE OF EXPENDITURE	X Political Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly online donation site fee	
11 Complete ONLY if direct candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
Date 04/27/2019	Payee name Starbucks		
Amount (\$) 100.00 Payee address; City; State; Zip Code 4343 W. Northwest Hwy, #390 Dallas, TX 75220			
TYPE OF EXPENDITURE	X Political Non-Politica	al	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		f travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/Donations Made B Candidate/Officeholder/Politica		Contract Labor	Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F4: 18 of 18	2 FILER NAME Laura Miller		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRED	IT CARD	\$	
5 Date 04/27/2019	6 Payee name Chevron			
7 Amount (\$) 56.96	8 Payee address; City; State; Zip Code 8424 Preston Rd. Dallas, TX 75225			
9 TYPE OF EXPENDITURE	X Political Non-Political	I		
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description	on	
PURPOSE OF	Transportation Equipment & Related Expense	Check if	travel outside of Texas. Complete Schedule T.	
EXPENDITURE		Gas for camp	f Austin, TX, officeholder living expense paign travel	
11 Complete ONLY if direct candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
Date 04/27/2019	Payee name Lyft			
Amount (\$) Payee address; City; State; Zip Code 185 Berry St. San Francisco, CA 94107				
TYPE OF EXPENDITURE	X Political Non-Politica	ıl		
	Category (See Categories listed at the top of this schedule)	Description	on	
PURPOSE	Transportation Equipment & Related Expense		travel outside of Texas. Complete Schedule T.	
OF EXPENDITURE			f Austin, TX, officeholder living expense to do yardsign installation	
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			