

FORM C/OH
COVER SHEET PG 1

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Mr John K Courage	15 Filer ID (Ethics Commission Filers)
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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.
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COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
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☐ Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 45207.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	\$ 44.85
	4. TOTAL POLITICAL EXPENDITURES	\$ 40241.76
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 23948.59
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 39128.86

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*** Electronically Certified ***

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mr John K Courage, this the 28th day of May, 2021, 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

SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

19 FILER NAME Mr John K Courage		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 45207.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 39452.90
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 788.86
10.	<input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 56

2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
4/23/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Arthur Nicholson

7 Amount of contribution (\$) **125.00**

6 Contributor address; City; State; Zip Code
**202 Hillview Dr
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Self-Employed

Date
4/26/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ann Parsons

Amount of contribution (\$) **20.00**

Contributor address; City; State; Zip Code
**11011 Whisper Hollow St
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
Retired Prof

Employer (See instructions)
Alamo Colleges - Retired Math Professor

Date
4/26/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
David Askey

Amount of contribution (\$) **100.00**

Contributor address; City; State; Zip Code
**14117 Jones Maltsberger Rd
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Cyber Security

Employer (See instructions)
Tech Now, Inc

Date
4/26/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Richard Pressman

Amount of contribution (\$) **20.00**

Contributor address; City; State; Zip Code
**11310 Whisper Fls
San antonio, TX 78258**

Principal occupation / Job title (See instructions)
ret

Employer (See instructions)
ret

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**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 4/26/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tom Johnson 6 Contributor address; City; State; Zip Code 1210 Country Path San Antonio, TX 78209	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See instructions) retired		9 Employer (See instructions) Retired
Date 4/26/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lee Pais Contributor address; City; State; Zip Code 18306 Redriver Song San Antonio, TX 78259	Amount of contribution (\$) 10.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) Retired
Date 4/26/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) alex hill Contributor address; City; State; Zip Code 16803 SUMMER CREEK Dr Cibolo, TX 78108	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Mgr		Employer (See instructions) USAA
Date 4/26/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joe Orr Contributor address; City; State; Zip Code 1134 PEG OAK bulverde, TX 78163	Amount of contribution (\$) 9.00
Principal occupation / Job title (See instructions) Educator		Employer (See instructions) NISD
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 4/26/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mary Cardenas 6 Contributor address; City; State; Zip Code 1226 Carmel Chase San Antonio, TX 78240	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) CPA		9 Employer (See instructions) CPA
Date 4/26/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Betty Kuykendall Contributor address; City; State; Zip Code 14922 DANCERS IMAGE San Antonio, TX 78240	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
Date 4/26/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert Miller Contributor address; City; State; Zip Code 14215 Jones Maltsberger Rd Austin, TX 78701	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) None
Date 4/26/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Viki Melton Contributor address; City; State; Zip Code 20623 Wild Springs Dr Floresville, TX 78114	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Realtor / Broker		Employer (See instructions) Stone Oak Realty Services
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 4 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 4/27/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jean Latsha 6 Contributor address; City; State; Zip Code 5014 W Frances Pl Austin, TX 78703	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) developer		9 Employer (See instructions) Pedcor Investments
Date 5/1/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daniel Cooper Contributor address; City; State; Zip Code 51 Silverhorn Dr Berlin, VT 05602	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 5/2/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Merrick Garb Contributor address; City; State; Zip Code 1444 Rhode Island Ave NW Washington, DC 20005	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Policy Analyst		Employer (See instructions) Federal Government
Date 5/2/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ann Marie Schroeder Contributor address; City; State; Zip Code PO Box 12450 San Antonio, TX 78230	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Manager		Employer (See instructions) USAA
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/2/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Austin Fleming 6 Contributor address; City; State; Zip Code 16706 Springhill Dr San Antonio, TX 78201-4838	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) Video Editor		9 Employer (See instructions) Self-Employed
Date 5/2/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David Plylar Contributor address; City; State; Zip Code 4218 Misty Glade San Antonio, TX 78230	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) retired
Date 5/2/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carolee Moore Contributor address; City; State; Zip Code 4218 Misty Glade Schertz, TX 78154	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Instructor		Employer (See instructions) UIW
Date 5/2/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yehonati Leor Contributor address; City; State; Zip Code 127 Sandhill Woods San Antonio, TX 78259	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Water policy advocate/analyst		Employer (See instructions) Texas Drought Project
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
5/2/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Roger Hooker

7 Amount of contribution (\$)
9.00

6 Contributor address; City; State; Zip Code
**2727 Rancho Mirage
san antonio, TX 78216**

8 Principal occupation / Job title (See instructions)
Retired IT Engineer

9 Employer (See instructions)
Retired

Date
5/2/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rebecca Waldman

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**112 E Rosewood Ave
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
N/A

Employer (See instructions)
Retired

Date
5/2/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
David Sponberg

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**13607 Liberty Oak
Austin, TX 78703**

Principal occupation / Job title (See instructions)
Diagnostician

Employer (See instructions)
NISD

Date
5/3/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
George L Lamborn

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**2410 Border Ln
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
N/A

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/3/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gloria G Gutierrez 6 Contributor address; City; State; Zip Code 9115 Blockade Dr San Antonio, TX 78240-2854	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) N/A
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barbara Moschner Contributor address; City; State; Zip Code 4606 Green Acres Woods St San Antonio, TX 78212	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wyndee Holbrook Contributor address; City; State; Zip Code 13301 Rockhampton St san antonio, TX 78210	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Director		Employer (See instructions) Interfaith SA Alliance
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Judith A Patton Contributor address; City; State; Zip Code 1804 Indian Paint Brush Rd San Antonio, TX 78232	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) lawyer		Employer (See instructions) N/A
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/3/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomas Cummins 6 Contributor address; City; State; Zip Code 5923 Woodridge Rock San Antonio, TX 78232	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) President		9 Employer (See instructions) Bexar County AFT
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brad Beldon Contributor address; City; State; Zip Code 35 Royal Waters Dr san antonio, TX 78209	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) BELDON Roofing Company
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rosemarie Zlotnick Contributor address; City; State; Zip Code 915 Steubing Oaks San Antonio, TX 78216	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pamela Bain Contributor address; City; State; Zip Code 10203 Sunflower Ln San Antonio, TX 78259	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) None
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
5/3/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Richard Butler

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**821 Firefly Dr
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)
Alumni Engagement Coordinator

9 Employer (See instructions)
Trinity University

Date
5/3/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Maria Miranda

Amount of contribution (\$)
20.00

Contributor address; City; State; Zip Code
**2107 Oak Wild St
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
student

Employer (See instructions)
none

Date
5/3/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kenneth Phelps

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**18222 CRYSTAL Cv
Longmont, CO 80501**

Principal occupation / Job title (See instructions)
na

Employer (See instructions)
retired

Date
5/3/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Eddie Kaufman

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**12159 Stoney Pond
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Owner

Employer (See instructions)
Retox Bar

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**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/3/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Donna Talbott 6 Contributor address; City; State; Zip Code 2622 Crow Vly Beaumont, TX 77706	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) N/A		9 Employer (See instructions) N/A
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jennifer Easley Contributor address; City; State; Zip Code 1530 Palmer Vw San Antonio, TX 78257	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) Homemaker		Employer (See instructions) N/A
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richard Pressman Contributor address; City; State; Zip Code 11310 Whisper Fls san antonio, TX 78240	Amount of contribution (\$) 10.00
Principal occupation / Job title (See instructions) ret		Employer (See instructions) ret
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lisha Garcia Contributor address; City; State; Zip Code 3518 Bunyan St San Antonio, TX 78230	Amount of contribution (\$) 40.00
Principal occupation / Job title (See instructions) professional		Employer (See instructions) UTSA
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/3/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Frank Burney 6 Contributor address; City; State; Zip Code 112 E Pecan St San Antonio, TX 78259	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Partner		9 Employer (See instructions) Martin & Drought, P.C.
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patricia Ezell Contributor address; City; State; Zip Code 1911 Archway Dr San Antonio, TX 78230	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) N/A
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cone Wells Contributor address; City; State; Zip Code 219 WILLOWBLUFF Dr San Antonio, TX 78216	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jimmy Toubin Contributor address; City; State; Zip Code 3106 Elm Gate San Antonio, TX 78213	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) President		Employer (See instructions) Toubin Insurance Agency
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/3/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jules Dufresne 6 Contributor address; City; State; Zip Code 141 Lindy Hls Austin , TX 78704	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) Training Manager		9 Employer (See instructions) Complete Data Systems
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Katherine Beale Contributor address; City; State; Zip Code 1518 Deer Run St San Antonio, TX 78232	Amount of contribution (\$) 10.00
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) Vohra Wound Physicians
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rick Brooks Contributor address; City; State; Zip Code 2330 W Kings Hwy San Antonio, TX 78217	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) teacher		Employer (See instructions) Northside ISD
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mike Suarez Contributor address; City; State; Zip Code PO Box 1186 Moab, UT 84532-1186	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 13 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/3/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tim Mahoney 6 Contributor address; City; State; Zip Code PO Box 2360 San Antonio, TX 78250	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See instructions) law & community organizing		9 Employer (See instructions) Community Planning Matters!
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scott Frishman Contributor address; City; State; Zip Code 13318 Gable Village Dr San Antonio, TX 78258	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) Pharmacist		Employer (See instructions) University Health
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) carla zainie Contributor address; City; State; Zip Code PO Box 12426 San Antonio, TX 78232	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) retired
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kenneth Kanagaki Contributor address; City; State; Zip Code 9410 Whitehall St San Antonio, TX 78258	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) retired
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/3/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Courtney Denton 6 Contributor address; City; State; Zip Code 315 Shropshire Dr San Antonio, TX 78232	7 Amount of contribution (\$) 150.00
8 Principal occupation / Job title (See instructions) Public Health Research		9 Employer (See instructions) UTHSA
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charles Allen Contributor address; City; State; Zip Code 925 Hedgestone Dr Austin, TX 78703	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Minister		Employer (See instructions) Self
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alisha King Contributor address; City; State; Zip Code 155 Brees Blvd San Antonio, TX 78213	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) VA
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) alex hill Contributor address; City; State; Zip Code 16803 SUMMER CREEK Dr San Antonio, TX 78259	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Mgr		Employer (See instructions) USAA
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/3/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Becky Davenport 6 Contributor address; City; State; Zip Code 22454 Navasota Cir san antonio, TX 78216	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) Therapist		9 Employer (See instructions) Self-employed
Date 5/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Karin Book Contributor address; City; State; Zip Code 17102 Fawn Eagle San Antonio, TX 78228	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) Not employed
Date 5/4/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael D Beldon Contributor address; City; State; Zip Code 4 Westelm Circle San Antonio, TX 78230	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 5/4/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scott Teeter Contributor address; City; State; Zip Code 15522 Clover Rdg San Antonio, TX 78248-1333	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) President		Employer (See instructions) BitterBlue, Inc
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 16 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/4/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sandi Teeter 6 Contributor address; City; State; Zip Code 15522 Clover Rdg San Antonio, TX 78248-1333	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) N		9 Employer (See instructions)
Date 5/4/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hall S Hammond Contributor address; City; State; Zip Code 214 Argyle San Antonio, TX 78209	Amount of contribution (\$) 200.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 5/4/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edward Malich Contributor address; City; State; Zip Code 19103 Heather Oaks Dallas, TX 75220	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) NA
Date 5/4/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Samuel Temple Contributor address; City; State; Zip Code 2715 Woodley Canyon Lake, TX 78133	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Statistician		Employer (See instructions) Visionworks

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 17 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/4/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Goodman 6 Contributor address; City; State; Zip Code 1122 Garraty Rd San Antonio, TX 78216	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See instructions) N/A		9 Employer (See instructions) N/A
Date 5/4/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pablo Escamilla Contributor address; City; State; Zip Code 1301 Richmond Ave Early, TX 76802	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Escamilla & Poneck, LLP
Date 5/4/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pablo Escamilla Contributor address; City; State; Zip Code 1301 Richmond Ave San Antonio, TX 78212	Amount of contribution (\$) 450.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Escamilla & Poneck, LLP
Date 5/4/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David Goff Contributor address; City; State; Zip Code 19538 Mill Oak castro valley, CA 94546	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Medical Physicist		Employer (See instructions) Medical & Radiation Physics, Inc.
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/4/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keith Riggle 6 Contributor address; City; State; Zip Code 7911 CREEK TRAIL St San Antonio, TX 78230	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) US Air Force
Date 5/5/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lloyd A Denton Contributor address; City; State; Zip Code 1 Bitterblue Ln San Antonio, TX 78218-1790	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) BitterBlue, Inc
Date 5/5/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Camille L Denton Contributor address; City; State; Zip Code 1 Bitterblue Ln San Antonio, TX 78218-1790	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Self employed		Employer (See instructions)
Date 5/5/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Margaret M Hartman Contributor address; City; State; Zip Code 1500 Fawn Bluff San Antonio, TX 78248	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
5/5/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ann D Wells

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
11 Lynn Batts Lane
San Antonio, TX 78218

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
N/A

Date
5/5/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mary T Ross

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
3611 Shallow Brook St
San Antonio, TX 78247

Principal occupation / Job title (See instructions)
Accountant

Employer (See instructions)
Denton Development

Date
5/5/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brenda s Armstrong

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
2510 Inwood View Dr
San Antonio, TX 78248

Principal occupation / Job title (See instructions)
EX Asst.

Employer (See instructions)
Denton Development

Date
5/5/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kenton Armstrong

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
2510 Inwood View Dr
San Antonio, TX 78248

Principal occupation / Job title (See instructions)
President

Employer (See instructions)
Texas State Home Loans

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
5/5/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ralph Domas

7 Amount of contribution (\$)
35.00

6 Contributor address; City; State; Zip Code
**19307 Atoko Way
Schertz, TX 78154**

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
N/A

Date
5/5/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Marta Crawford

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**2310 Tristan Run
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
RETIRED

Employer (See instructions)
RETIRED

Date
5/5/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Molly Cox

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**122 Jeanette Dr
Dripping Springs, TX 78620**

Principal occupation / Job title (See instructions)
Consultant

Employer (See instructions)
Self-employed

Date
5/6/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Richard K Sheldon

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**4006 Green Oak Dr
Waco, TX 76710**

Principal occupation / Job title (See instructions)
N

Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/6/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lisa L Sheldon 6 Contributor address; City; State; Zip Code 4006 Green Oak Dr Waco, TX 76710	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) N		9 Employer (See instructions)
Date 5/6/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Samuel N Hinton Contributor address; City; State; Zip Code 15634 Mission Crst San Antonio, TX 78232-3452	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 5/6/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Esperanza H Andrade Contributor address; City; State; Zip Code 123 Lexington #1604 San Antonio, TX 78205	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Partner		Employer (See instructions) Andrade-Van de Putte Assoc
Date 5/6/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elizabeth A Wong Contributor address; City; State; Zip Code 910 S Alamo San Antonio, TX 78205	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) unknown		Employer (See instructions) unknown

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 22 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/6/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ann Stevens 6 Contributor address; City; State; Zip Code 9035 Luzita Ln San Antonio, TX 78212	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) N/A		9 Employer (See instructions) N/A
Date 5/6/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elizabeth Graham Contributor address; City; State; Zip Code 726 E NOTTINGHAM Dr San Antonio, TX 78230	Amount of contribution (\$) 15.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) Elizabeth L. Graham
Date 5/6/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) William Shown Contributor address; City; State; Zip Code 212 Madison San Antonio, TX 78248	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Chief Real Estate Officer		Employer (See instructions) Pearl
Date 5/6/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bruce Akright Contributor address; City; State; Zip Code 322 Bluffcrest San Antonio, TX 78232	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) physician		Employer (See instructions) Northeast Ob/Gyn Associates
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 23 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/7/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Linebarger Googgan 6 Contributor address; City; State; Zip Code PO Box 17428 San Antonio, TX 78760	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 5/7/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael Jouffray Contributor address; City; State; Zip Code 2015 Oak Vista St San Antonio, TX 78258	Amount of contribution (\$) 200.00
Principal occupation / Job title (See instructions) RETIRED		Employer (See instructions) RETIRED
Date 5/7/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alfonso E Alonso jr Contributor address; City; State; Zip Code 3118 Twisted Crk San Antonio, TX 78216	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Self employed
Date 5/7/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elaine & Steve Kovner Contributor address; City; State; Zip Code 1323 CHARLISAS Way San Antonio, TX 78229-4432	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) CPA		Employer (See instructions) Retired
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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2 FILER NAME
Mr John K Courage

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4 Date
5/7/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Lukin Gilliland

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
901 NE Loop 410
Seguin, TX 78155

8 Principal occupation / Job title (See instructions)
Investor

9 Employer (See instructions)
Self Employed

Date
5/8/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Patricia Sankey

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
1831 Parhaven Dr
Broomfield, CO 80020

Principal occupation / Job title (See instructions)
RResidential Real estate sales & property management

Employer (See instructions)
Self

Date
5/8/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Marianne Kestenbaum

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
13727 Stony Forest Dr
San Antonio, TX 78213

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
5/8/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
David DeWall

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
31 Inwood Mnr
San Antonio, TX 78257

Principal occupation / Job title (See instructions)
Retired lawyer

Employer (See instructions)
Retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

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2 FILER NAME
Mr John K Courage

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4 Date
5/9/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
James F Courage

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
1938 Broken Oak St
San Antonio, TX 78232

8 Principal occupation / Job title (See instructions)
ins Agent

9 Employer (See instructions)
NY Life

Date
5/9/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gregg Kowalski

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
PO Box 1361
San Antonio, TX 78295-1361

Principal occupation / Job title (See instructions)
Hospitality

Employer (See instructions)
The RK Group

Date
5/10/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hubert Hill

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
24806 Night Arrow
San Antonio, TX 78232

Principal occupation / Job title (See instructions)
School administrator

Employer (See instructions)
Retired

Date
5/10/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
John Archer

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
134 W Mistletoe
San Antonio, TX 78258

Principal occupation / Job title (See instructions)
consultant

Employer (See instructions)
Self

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
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5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Bill Samson

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**831 W Woodlawn Ave
San Antonio, TX 78258**

8 Principal occupation / Job title (See instructions)
CFO

9 Employer (See instructions)
SCS

Date
5/10/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Emily Kobernick

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**2690 Blue Wing Rd lot 2
San Antonio, TX 78238**

Principal occupation / Job title (See instructions)
Executive Administrative Assistant

Employer (See instructions)
Strategic Campaign Sourcing LLC

Date
5/10/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mallory Samson

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**831 W Woodlawn Ave
Helotes, TX 78023**

Principal occupation / Job title (See instructions)
Operational Strategy

Employer (See instructions)
Korn Ferry

Date
5/10/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gwendolyn Samson

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**831 W Woodlawn Ave
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Student

Employer (See instructions)
NA

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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2 FILER NAME
Mr John K Courage

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4 Date
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5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Tyler Chalfin

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**312 Pearl Pkwy
Schertz, TX 78154**

8 Principal occupation / Job title (See instructions)
Unlisted

9 Employer (See instructions)
Unlisted

Date
5/10/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Michael Villarreal

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**639 Mission St
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
Professor

Employer (See instructions)
UTSA

Date
5/10/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Samuel Vesa

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**2104 Pipestone Dr
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Healthcare

Employer (See instructions)
Pipestone Place Assisted Living

Date
5/10/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tom Kelly

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**1409 Quaker Ridge Dr
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Printing

Employer (See instructions)
Kelly graphics

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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1 Total pages Schedule A1:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
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5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Michelle R. Faires

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**28038 Blanco Rd
San Antonio, TX 78216**

8 Principal occupation / Job title (See instructions)
Film producer

9 Employer (See instructions)
Self-employed

Date
5/11/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Robert L Worth

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**270 Terrell RD
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Chairman

Employer (See instructions)
Workth & Assoc.

Date
5/11/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mary_Hare Worth

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**270 Terrell RD
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retire

Date
5/11/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Zada Takao

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**19206 Barrow Bay
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
CPA

Employer (See instructions)
FHK, CPA

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/11/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ryan Takao 6 Contributor address; City; State; Zip Code 19206 Barrow Bay San Antonio, TX 78258	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Self		9 Employer (See instructions) Tennis Instructor
Date 5/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daniel Braaten Contributor address; City; State; Zip Code 1443 Osnats Pt San Antonio, TX 78258	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Professor		Employer (See instructions) Texas Lutheran University
Date 5/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) April Ancira Contributor address; City; State; Zip Code 31305 Keeneland Dr san antonio, TX 78240	Amount of contribution (\$) 150.00
Principal occupation / Job title (See instructions) VP		Employer (See instructions) Ancira
Date 5/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steve Hays Contributor address; City; State; Zip Code 3314 Falling Brk Austin, TX 78701	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) N/A
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/11/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patricia Smothers 6 Contributor address; City; State; Zip Code 114 Geneseo Rd San Antonio, TX 78259	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) investor		9 Employer (See instructions) N/A
Date 5/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael Westheimer Contributor address; City; State; Zip Code 1101 River Park Rd San Antonio, TX 78233	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Real Estate		Employer (See instructions) Coldwater Ventures
Date 5/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alison Gonzales Contributor address; City; State; Zip Code 1029 Bedford Ct W San Antonio, TX 78201-4838	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) teacher		Employer (See instructions) Irving ISD
Date 5/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alison Boone Contributor address; City; State; Zip Code 822 Alamo Heights Blvd San antonio, TX 78258	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
5/12/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Gina Sandoval

7 Amount of contribution (\$)
40.00

6 Contributor address; City; State; Zip Code
**6963 Willow Oak
San Antonio, TX 78213**

8 Principal occupation / Job title (See instructions)
Scrum Master

9 Employer (See instructions)
USAA

Date
5/12/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Arthur Downey

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**730 Arch Stone
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Colonel US Army

Employer (See instructions)
Retired

Date
5/13/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Joel Mayer

Amount of contribution (\$)
27.00

Contributor address; City; State; Zip Code
**414 Kings Ct
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
N/A

Date
5/13/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Doug Smith

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**3110 Whisper Brk
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Export consultant

Employer (See instructions)
UTSA

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 32 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/14/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joshua Crump 6 Contributor address; City; State; Zip Code 5538 Arcadia Park Austin, TX 78703	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) Engineer		9 Employer (See instructions) Usaa
Date 5/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Queta Rodriguez Contributor address; City; State; Zip Code 501 Oakwood Dr san antonio, TX 78201	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Program Director		Employer (See instructions) FourBlock Foundation
Date 5/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) linda Comeaux Contributor address; City; State; Zip Code 3185 Morning Crk San Antonio, TX 78232	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) n/a		Employer (See instructions) n/a
Date 5/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Armen Babajanian Contributor address; City; State; Zip Code 122 Atwater Dr La Coste, TX 78039	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) World Affairs Council
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 33 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/15/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) CWA - COPE PAC 6 Contributor address; City; State; Zip Code 501 3rd Street Washington, DC 20001	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 5/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kenneth Brown Contributor address; City; State; Zip Code 2454 Toftrees San Antonio, TX 78209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Brown & Ortiz PC
Date 5/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leslie Brown Contributor address; City; State; Zip Code 2454 Toftrees San Antonio, TX 78209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) US Air Force
Date 5/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daniel Ortiz Contributor address; City; State; Zip Code 9103 Mellbrook St San Antonio, TX 78230	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Brown & Ortiz PC
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
5/15/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Casandra Ortiz

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**9103 Mellbrook St
San Antonio, TX 78230**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Kassahn & Ortiz

Date
5/15/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
John Rees

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**104 Parade
Castle Hills, TX 78213**

Principal occupation / Job title (See instructions)
Organizer

Employer (See instructions)
AFSCME

Date
5/15/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Austin Fleming

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**16706 Springhill Dr
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
Video Editor

Employer (See instructions)
Self-Employed

Date
5/16/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Elisa Bernal

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**3010 Whisper Fern
Kathleen, GA 31047**

Principal occupation / Job title (See instructions)
Retired attorney

Employer (See instructions)
Retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 35 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/16/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bill Hurley 6 Contributor address; City; State; Zip Code 11811 Mill Pond San Antonio, TX 78212	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See instructions) Group Leader in SA		9 Employer (See instructions) Citizens Climate Lobby
Date 5/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Mize Contributor address; City; State; Zip Code 1302 Vista Del Rio San Antonio, TX 78232	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Architect		Employer (See instructions) Ford, Powell & Carson
Date 5/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Karin Book Contributor address; City; State; Zip Code 17102 Fawn Eagle San Antonio, TX 78230	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) Not employed
Date 5/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Andie Campos Contributor address; City; State; Zip Code 527 Sonnet Dr San Antonio, TX 78259	Amount of contribution (\$) 9.00
Principal occupation / Job title (See instructions) Design Director		Employer (See instructions) USAA
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 36 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/16/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richard Pressman 6 Contributor address; City; State; Zip Code 11310 Whisper Fls San Antonio, TX 78209	7 Amount of contribution (\$) 10.00
8 Principal occupation / Job title (See instructions) ret		9 Employer (See instructions) ret
Date 5/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kimberly Bragman Contributor address; City; State; Zip Code 1838 Mountjoy St San Antonio, TX 78230	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Realtor		Employer (See instructions) Self employed I
Date 5/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rick Brooks Contributor address; City; State; Zip Code 2330 W Kings Hwy Austin, TX 78704	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) teacher		Employer (See instructions) Northside ISD
Date 5/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richard Alles Contributor address; City; State; Zip Code 233 Meadowbrook Dr San Antonio, TX 78232	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Licensed Engineer		Employer (See instructions) N/A
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 37 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/17/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John T Steen Jr 6 Contributor address; City; State; Zip Code 1250 NE Loop 410 #305 San Antonio, TX 78209	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Lawyer/Investor		9 Employer (See instructions) Self
Date 5/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weisie Steen Contributor address; City; State; Zip Code 1250 NE Loop 410 #305 San Antonio, TX 78209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Investor		Employer (See instructions) Self
Date 5/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) William Goodman Contributor address; City; State; Zip Code PO Box 12467 Takoma Park, MD 20912	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) attorney		Employer (See instructions) self employed
Date 5/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kelly Trout Contributor address; City; State; Zip Code 1218 Wooded Knl San Antonio, TX 78259	Amount of contribution (\$) 9.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) NA
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 38 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/17/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael Yoder 6 Contributor address; City; State; Zip Code 2326 Blake Way Berkeley, CA 94705	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See instructions) Instructor		9 Employer (See instructions) Texas A&M International University
Date 5/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Juliet Briskin Contributor address; City; State; Zip Code 918 Arizona Ash St san antonio, TX 78209	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) WellMed
Date 5/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anthony Martin Contributor address; City; State; Zip Code 20022 Horizon Bldg San Antonio, TX 78212	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 5/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kayellen Walker Contributor address; City; State; Zip Code PO Box 120431 Helotes, TX 78023	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) Museum worker		Employer (See instructions) N/A
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 39 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/17/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stephen Versteeg 6 Contributor address; City; State; Zip Code 105 Reno Austin, TX 78704	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) Design Engineer		9 Employer (See instructions) FBD Partnership
Date 5/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) IBC State PAC Contributor address; City; State; Zip Code 130 E. Travis San Antonio, TX 78205	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 5/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elizabeth Montgomery Contributor address; City; State; Zip Code 17435 Sapphire Rim Dr San Antonio, TX 78216	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Instructor		Employer (See instructions) Alamo Colleges
Date 5/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sharon Hellman-Freiberg Contributor address; City; State; Zip Code 18122 Beargrass Ct san antonio, TX 78232	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) GERONTOLOGIST		Employer (See instructions) RETIRED
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 40 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Catherine Silvers 6 Contributor address; City; State; Zip Code 2427 Thrasher Oak San Antonio, TX 78258	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired
Date 5/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edward Kelley Contributor address; City; State; Zip Code 7 Links Green San Antonio, TX 78257	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) USAA Real Estate
Date 5/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christine Hortick Contributor address; City; State; Zip Code 262 E Elmview Pl San Antonio , TX 78258	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Law Office of Christine Hortic
Date 5/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richard Wells Contributor address; City; State; Zip Code 610 E Market St Austin, TX 78733	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Executive		Employer (See instructions) Dailey & Wells Comm
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
5/20/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
JoAnne Wells

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**610 E Market St
san antonio, TX 78240**

8 Principal occupation / Job title (See instructions)
Executive

9 Employer (See instructions)
Dailey & Wells Comm

Date
5/20/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Steve Hixon

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**114 Rio Bravo
San Antonio, TX 78240**

Principal occupation / Job title (See instructions)
N/A

Employer (See instructions)
N/A

Date
5/21/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gordon V Hartman

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**1202 W. Bitters Bldg 1 #1200
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
President

Employer (See instructions)
Gordon Hartman Enterprises

Date
5/21/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Steven C Price

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**6300 Rue Marielyne St #1903
San Antonio, TX 78238-1634**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
N/A

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 42 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/21/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aaron K Parenica 6 Contributor address; City; State; Zip Code 8219 San Fidel Way San Antonio, TX 78255-2303	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) Proj Mgr		9 Employer (See instructions) Kimley-Horn
Date 5/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) JoAnne W Johnson Contributor address; City; State; Zip Code 12302 Montel Helotes, TX 78023-2981	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 5/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Linda Chavez-Thompson Contributor address; City; State; Zip Code 6226 Meadow Hun San Antonio, TX 78239	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 5/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Macon Roemer Contributor address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) N/A
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 43 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/21/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MaryLou Roemer 6 Contributor address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) retired		9 Employer (See instructions) N/A
Date 5/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walter Embrey Contributor address; City; State; Zip Code 1020 NE Loop 410 San Antonio , TX 78258	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Real Estate Developer		Employer (See instructions) Embrey Partners, Ltd.
Date 5/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mark Prange Contributor address; City; State; Zip Code 5007 E Beverly Mae Dr San Antonio, TX 78248	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) self employed
Date 5/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richard Oppenheim Contributor address; City; State; Zip Code 1102 Haltown Dr San Antonio, TX 78213	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Musician		Employer (See instructions) Self
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

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SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 44 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/22/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steven Garcia 6 Contributor address; City; State; Zip Code 2714 Gibbens San Antonio, TX 78224	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) Driver		9 Employer (See instructions) River City Produce
Date 5/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marci Ince Contributor address; City; State; Zip Code 30 Imperial Way San Antonio, TX 78248	Amount of contribution (\$) 70.00
Principal occupation / Job title (See instructions) Community Service		Employer (See instructions) N/A
Date 5/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martha Spinks Contributor address; City; State; Zip Code 419 Stonewood St San Antonio, TX 78216	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 5/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leticia Z Bresnahan Contributor address; City; State; Zip Code 693 Ridge Trace San Antonio, TX 78258	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Director		Employer (See instructions) UT Health
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
5/22/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Roger Bresnahan

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**693 Ridge Trace
San Antonio, TX 78258**

8 Principal occupation / Job title (See instructions)
Lawyer

9 Employer (See instructions)
Self

Date
5/22/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Johnny Walker

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**419 Stonewood St
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
N/A

Date
5/22/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Joshua Medina

Amount of contribution (\$)
20.00

Contributor address; City; State; Zip Code
**402 E Edmonds
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
Architect

Employer (See instructions)
Perkins and Will

Date
5/22/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
North East Bexar County Democrats

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**PO Box 700766
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
Political Action Committee

Employer (See instructions)
Political Action Committee

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 46 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/22/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) G Escobedo 6 Contributor address; City; State; Zip Code 20611 Idylwild San Antonio, TX 78209	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See instructions) N/a		9 Employer (See instructions) N/a
Date 5/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eileen Pace Contributor address; City; State; Zip Code 12114 Lemon Blossom Cibolo, TX 78108	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Public Relations		Employer (See instructions) Self
Date 5/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Felicia Glenn Contributor address; City; State; Zip Code 1214 Townsend Ave Berlin, VT 05602	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Writer		Employer (See instructions) Self
Date 5/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) J Emil Hunziker Contributor address; City; State; Zip Code 5506 Duval St Berlin, VT 05602	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) None
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 47 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/23/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jaime Palacios 6 Contributor address; City; State; Zip Code 19403 Easy Oak San Antonio, TX 78249	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See instructions) Account Manager		9 Employer (See instructions) Howard Industries
Date 5/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert Miller Contributor address; City; State; Zip Code 14215 Jones Maltsberger Rd Washington , DC 20005	Amount of contribution (\$) 200.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) None
Date 5/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tom Johnson Contributor address; City; State; Zip Code 1210 Country Path San Antonio, TX 78229-4432	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) Retired
Date 5/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patricia Alvarez Contributor address; City; State; Zip Code PO Box 782005 San Antonio, TX 78259	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Judge		Employer (See instructions) 4th Court of Appeals
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
48 of 56

2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
5/23/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Gunnar Johnson

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**15119 Sun Trl
San Antonio, TX 78216**

8 Principal occupation / Job title (See instructions)
Project Engineer

9 Employer (See instructions)
Zachry Construction Corporation

Date
5/23/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gregory Meyer

Amount of contribution (\$)
15.00

Contributor address; City; State; Zip Code
**12351 Capeswood St
san antonio, TX 78216**

Principal occupation / Job title (See instructions)
Lead Data Engineer

Employer (See instructions)
USAA

Date
5/23/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Katrinka Hansen

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**PO Box 769111
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Medical support assistant

Employer (See instructions)
ZAI-inc

Date
5/23/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Edward Powers

Amount of contribution (\$)
30.00

Contributor address; City; State; Zip Code
**3523 Red Oak Ln
Bulverde, TX 78163**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
None

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**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 49 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/23/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Merrick Garb 6 Contributor address; City; State; Zip Code 1444 Rhode Island Ave NW San Antonio, TX 78250-4053	7 Amount of contribution (\$) 10.00
8 Principal occupation / Job title (See instructions) Policy Analyst		9 Employer (See instructions) Federal Government
Date 5/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Byron Barber Contributor address; City; State; Zip Code 1906 Deer Mtn San Antonio, TX 78232	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) airline pilot		Employer (See instructions) N/A
Date 5/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael Fernandez Contributor address; City; State; Zip Code 119 E Hollywood Ave Lakehills, TX 78063	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Founder		Employer (See instructions) Factory 360
Date 5/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Denise Richter Contributor address; City; State; Zip Code 148 Brightwood PI San Antonio, TX 78260	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Tour Guide		Employer (See instructions) self-employed
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 50 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/23/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Laurissa Grinnell 6 Contributor address; City; State; Zip Code 1901 Ridge Park St San Antonio, TX 78232	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) RN Liaison		9 Employer (See instructions) Kindred Hospice
Date 5/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mary Alfaro Contributor address; City; State; Zip Code 6334 SPRING TIME Dr San Antonio, TX 78232	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) n/a		Employer (See instructions) RETIRED
Date 5/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nancy M Daniels Contributor address; City; State; Zip Code 3142 Satellite Dr San Antonio, TX 78217-4025	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 5/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Killen Griffin & Farrimond Political Committee Contributor address; City; State; Zip Code 100 NE Loop 410 #650 San Antonio, TX 78216	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions)		Employer (See instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
5/24/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Gregory Patterson

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**15742 Dawn Crest
San Antonio, TX 78248**

8 Principal occupation / Job title (See instructions)
N/A

9 Employer (See instructions)
N/A

Date
5/24/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Charles Zeller

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**811 N Tumbleweed Dr
Austin, TX 78733-3243**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
NA

Date
5/24/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Paul M Basaldua

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**5 Woltwood
San Antonio, TX 78248-2444**

Principal occupation / Job title (See instructions)
Real Estate

Employer (See instructions)
Versa Terra Development

Date
5/24/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ted Peck

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**14201 Parkhurst St
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
Self

Employer (See instructions)
Math-Tutor

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date
5/24/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
CEC PAC

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**11550 W Interstate 10 #395
San Antonio, TX 78230**

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

Date
5/24/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Pat Frost

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**520 Geneseo Rd
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
President

Employer (See instructions)
Frost Bank

Date
5/24/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kathleen Finck

Amount of contribution (\$)
20.00

Contributor address; City; State; Zip Code
**211 Zambrano Rd
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Lawyer

Employer (See instructions)
Frost Bank

Date
5/24/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Marga Speicher

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**1438 Grey Oak Dr
san antonio, TX 78209**

Principal occupation / Job title (See instructions)
Psychotherapist

Employer (See instructions)
Self-employed

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**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 53 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/24/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trey Embrey 6 Contributor address; City; State; Zip Code 405 Wiltshire Ave San Antonio, TX 78232	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Real Estate Developer		9 Employer (See instructions) Embrey Partners
Date 5/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lupita Gutierrez Contributor address; City; State; Zip Code 2301 W Gramercy Pl San Antonio, TX 78216	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Insurance Broker		Employer (See instructions) Self
Date 5/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Donna Talbott Contributor address; City; State; Zip Code 2622 Crow Vly San Antonio, TX 78259	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 5/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steve Lehtinen Contributor address; City; State; Zip Code 1310 Arrow Spg San Antonio, TX 78209	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 54 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/24/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Louis Rodriguez 6 Contributor address; City; State; Zip Code 12810 Varrientos St San Antonio, TX 78232	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Self
Date 5/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Diana Klodginski Contributor address; City; State; Zip Code 32 Imperial Way San Antonio, TX 78209	Amount of contribution (\$) 9.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
Date 5/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Margaret Embry Contributor address; City; State; Zip Code 18470 Rogers Bnd San Antonio, TX 78245	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) DOJ
Date 5/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greg Pena Contributor address; City; State; Zip Code 530 Ware Austin , TX 78745	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Manager		Employer (See instructions) Naturaleza Celestial (Mkt. Sq.)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 55 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/24/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael Cornett 6 Contributor address; City; State; Zip Code 1126 Tranquil Trail Dr Washington, DC 20007	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See instructions) Professor		9 Employer (See instructions) Retired
Date 5/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steven Pliszka Contributor address; City; State; Zip Code 15710 Mission Crst San Antonio, TX 78259	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) UT Health San Antonio
Date 5/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gary Rogers Contributor address; City; State; Zip Code 203 Donella Dr San Antonio, TX 78216	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 5/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barb Bikoff Contributor address; City; State; Zip Code 606 San Diego Corpus christi, TX 78417	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Clinical Program Consultant		Employer (See instructions) CVS Health
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 56 of 56
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/25/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mark Prange 6 Contributor address; City; State; Zip Code 5007 E Beverly Mae Dr San Antonio, TX 78232	7 Amount of contribution (\$) 400.00
8 Principal occupation / Job title (See instructions) Physician		9 Employer (See instructions) self employed
Date 5/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mark Doty Contributor address; City; State; Zip Code 147 Caleta Bch Seabrook, TX 77586	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Clergy		Employer (See instructions) N/A
Date 5/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scott Sawtelle Contributor address; City; State; Zip Code 106 Five Oaks Austin, TX 78727	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Investment Advisor		Employer (See instructions) Nelson Vandenburg & Campbell
Date 5/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kathleen Curry Contributor address; City; State; Zip Code 106 Five Oaks Longmont, CO 80501	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Retired
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1 of 1	
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0	
5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Contributor address; City; State; Zip Code	8 Amount of Contribution \$ 9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of Contribution \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (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 COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: 1 of 1
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Pledgor address; City; State; Zip Code	8 Amount of Pledge \$ 9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (See instructions)		11 Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
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		

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
1 of 1

2 FILER NAME
Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 0

5 Date of loan

7 Name of lender ☐ out-of-state PAC (ID# _____)

9 Loan Amount (\$)

6 Is lender a
financial
institution?

8 Lender address; City; State; Zip Code

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See instructions)

13 Employer (See instructions)

14 Description of Collateral
☐ none

15 ☐ Check if personal funds were deposited into political
account (See instructions)

16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

☐ not applicable

20 Principal occupation (See instructions)

21 Employer (See instructions)

Date of loan

Name of lender ☐ out-of-state PAC (ID# _____)

Loan Amount (\$)

Is lender a
financial
institution?

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See instructions)

Employer (See instructions)

Description of Collateral
☐ none

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

GUARANTOR
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

☐ not applicable

Principal occupation (See instructions)

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 4/26/2021	5 Payee name Facebook		
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Advertising
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 4/27/2021	Payee name Colt Osburn		
Amount (\$) 161.00	Payee address; City; State; Zip Code 17365 Henderson Pass #1233 San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Camapign Signs Materials		Description Reimbursement for purchases
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held John Courage Council District 9 N/A			
Date 4/27/2021	Payee name NGP VAN INC MOTO		
Amount (\$) 120.00	Payee address; City; State; Zip Code 655 15th st NW #650 Washington , DC 20005		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description phonebanking campaign source
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held John Courage Council District 9 N/A			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 2 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 4/28/2021	5 Payee name Michelle McBurney		
6 Amount (\$) 435.00	7 Payee address; City; State; Zip Code 2926 War Feather San Antonio, TX 78238		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Campaign Services		(b) Description Phone banking
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 4/28/2021	Payee name Herlinda Torres		
Amount (\$) 540.00	Payee address; City; State; Zip Code 619 North Hackberry San Antonio, TX 78202		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 4/28/2021	Payee name Mark Niedenberger		
Amount (\$) 450.00	Payee address; City; State; Zip Code 400 Bitters Rd #1511 San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 3 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 4/28/2021	5 Payee name Carmen Torres		
6 Amount (\$) 450.00	7 Payee address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Campaign Services		(b) Description Phone banking
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 4/28/2021	Payee name Maria Williams		
Amount (\$) 105.00	Payee address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 4/28/2021	Payee name Stacy Gillespie		
Amount (\$) 165.00	Payee address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 4 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 4/28/2021	5 Payee name Jacob Marshall		
6 Amount (\$) 555.00	7 Payee address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Campaign Services		(b) Description Phone banking
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Courage	Office sought Council District 9	Office held N/A

Date 4/28/2021	Payee name Anyka H Bumgarner		
Amount (\$) 240.00	Payee address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Courage	Office sought Council District 9	Office held N/A

Date 4/29/2021	Payee name Kelsey Brandt		
Amount (\$) 600.00	Payee address; City; State; Zip Code 101 Linda Dr San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Consultation Services		Description Campaign Volunteer Coordination
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Courage	Office sought Council District 9	Office held N/A

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 5 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 4/30/2021	5 Payee name Colt Osburn		
6 Amount (\$) 77.00	7 Payee address; City; State; Zip Code 17365 Henderson Pass #1233 San Antonio, TX 78232		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Camapign Signs Materials		(b) Description Reimbursement for purchases
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 4/30/2021	Payee name Frost Bank		
Amount (\$) 5.00	Payee address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Service Charges		Description Bank Service Charge
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/1/2021	Payee name Tilos Tex Mex, LLC		
Amount (\$) 788.86	Payee address; City; State; Zip Code 12403 West Ave San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Meeting Expense		Description Election Party
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 6 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/3/2021	5 Payee name NGP VAN INC MOTO		
6 Amount (\$) 120.00	7 Payee address; City; State; Zip Code 655 15th st NW #650 Washington , DC 20005		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description phonebanking campaign source
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/5/2021	Payee name Michelle McBurney		
Amount (\$) 240.00	Payee address; City; State; Zip Code 2926 War Feather San Antonio, TX 78238		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/5/2021	Payee name Herlinda Torres		
Amount (\$) 255.00	Payee address; City; State; Zip Code 619 North Hackberry San Antonio, TX 78202		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 7 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/5/2021	5 Payee name Jacob Marshall		
6 Amount (\$) 60.00	7 Payee address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Campaign Services		(b) Description Phone banking
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/5/2021	Payee name Mark Niedenberger		
Amount (\$) 360.00	Payee address; City; State; Zip Code 400 Bitters Rd #1511 San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/5/2021	Payee name Carmen Torres		
Amount (\$) 420.00	Payee address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 8 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/6/2021	5 Payee name JVC Media		
6 Amount (\$) 3842.88	7 Payee address; City; State; Zip Code 9335 Lamerton San Antonio, TX 78250		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Campaign signs
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/6/2021	Payee name Neighborhood News Inc		
Amount (\$) 685.00	Payee address; City; State; Zip Code 3740 Colony Dr. San Antonio, TX 78230		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description HOA News Ads
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/7/2021	Payee name Prestige Printing LLC		
Amount (\$) 500.12	Payee address; City; State; Zip Code 8 Burwood Lane San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Mailer
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 9 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/7/2021	5 Payee name Vista Print		
6 Amount (\$) 514.32	7 Payee address; City; State; Zip Code 275 Wyman St Waltham, MA 02451		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Advertising
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/7/2021	Payee name Dominos Pizza		
Amount (\$) 359.00	Payee address; City; State; Zip Code 19903 Stone Oak Pkwy San Antonio, TX 78258		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Food		Description Nurses Appreciation
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/10/2021	Payee name Sign Busters		
Amount (\$) 2905.00	Payee address; City; State; Zip Code 330 W. Baetz San Antonio, TX 78221		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Sign Display Service
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 10 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/13/2021	5 Payee name Carmen Torres		
6 Amount (\$) 165.00	7 Payee address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Campaign Services		(b) Description Phone banking
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/13/2021	Payee name Cricket Wireless		
Amount (\$) 30.00	Payee address; City; State; Zip Code 575 Morosgo Dr Atlanta, GA 30324		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Utilities		Description phone service
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/13/2021	Payee name Rocket Science Group, LLC		
Amount (\$) 67.15	Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE #5000 Atlanta, GA 30308		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 11 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/13/2021	5 Payee name Michelle McBurney		
6 Amount (\$) 82.50	7 Payee address; City; State; Zip Code 2926 War Feather San Antonio, TX 78238		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Campaign Services		(b) Description Phone banking
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/13/2021	Payee name Herlinda Torres		
Amount (\$) 82.50	Payee address; City; State; Zip Code 619 North Hackberry San Antonio, TX 78202		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/13/2021	Payee name Mark Niedenberger		
Amount (\$) 105.00	Payee address; City; State; Zip Code 400 Bitters Rd #1511 San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 12 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/14/2021	5 Payee name Kelsey Brandt		
6 Amount (\$) 750.00	7 Payee address; City; State; Zip Code 101 Linda Dr San Antonio, TX 78216		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Consultation Services		(b) Description Campaign Volunteer Coordination
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/14/2021	Payee name NationBuilder		
Amount (\$) 29.00	Payee address; City; State; Zip Code 520 S. Grand Ave Los Angeles, CA 90071		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Website Svcs
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/17/2021	Payee name ZOOM US		
Amount (\$) 16.00	Payee address; City; State; Zip Code 55 Almanden Blvd San Jose, CA 95113		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Video Meeting		Description Website Svcs
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 13 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/17/2021	5 Payee name Hustle Inc		
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 548 Market St San Antonio, TX 94104		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Phone Service
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/18/2021	Payee name JVC Media		
Amount (\$) 3564.52	Payee address; City; State; Zip Code 9335 Lamerton San Antonio, TX 78250		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Campaign signs
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/18/2021	Payee name Facebook		
Amount (\$) 25.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 14 of 22	2 FILER NAME Mr John K Courage	3 Filer ID (Ethics Commission Filers)
4 Date 5/19/2021	5 Payee name Facebook	
6 Amount (\$) 25.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising	(b) Description Advertising
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Courage	Office sought Council District 9 Office held N/A
Date 5/19/2021	Payee name Michelle McBurney	
Amount (\$) 322.50	Payee address; City; State; Zip Code 2926 War Feather San Antonio, TX 78238	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services	Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Courage	Office sought Council District 9 Office held N/A
Date 5/19/2021	Payee name Mark Niedenberger	
Amount (\$) 150.00	Payee address; City; State; Zip Code 400 Bitters Rd #1511 San Antonio, TX 78216	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services	Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Courage	Office sought Council District 9 Office held N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 15 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/19/2021	5 Payee name Herlinda Torres		
6 Amount (\$) 405.00	7 Payee address; City; State; Zip Code 619 North Hackberry San Antonio, TX 78202		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Campaign Services		(b) Description Phone banking
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/19/2021	Payee name Carmen Torres		
Amount (\$) 592.50	Payee address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/20/2021	Payee name Facebook		
Amount (\$) 25.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 16 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/21/2021	5 Payee name Facebook		
6 Amount (\$) 35.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Advertising
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/21/2021	Payee name RoboDial.Org, LLC		
Amount (\$) 66.78	Payee address; City; State; Zip Code 4601 North Fairfax Dr Arlington, VA 22203		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description phonebanking campaign source
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/23/2021	Payee name Academy		
Amount (\$) 50.00	Payee address; City; State; Zip Code 2024 TX-1604 Loop San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Supplies		Description Tents for Polling places
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 17 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/24/2021	5 Payee name Google		
6 Amount (\$) 11.44	7 Payee address; City; State; Zip Code 1600 Amphitheater Pkwy Mountain View, CA 94043		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Advertising
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/24/2021	Payee name Facebook		
Amount (\$) 200.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/24/2021	Payee name Colt Osburn		
Amount (\$) 60.00	Payee address; City; State; Zip Code 17365 Henderson Pass #1233 San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Food		Description Reimbursement for purchases
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 18 of 22	2 FILER NAME Mr John K Courage	3 Filer ID (Ethics Commission Filers)
4 Date 5/25/2021	5 Payee name Prestige Printing LLC	
6 Amount (\$) 3939.22	7 Payee address; City; State; Zip Code 8 Burwood Lane San Antonio, TX 78216	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising	(b) Description Mailer
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Courage	Office sought Council District 9 Office held N/A

Date 5/25/2021	Payee name Facebook	
Amount (\$) 300.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising	Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Courage	Office sought Council District 9 Office held N/A

Date 5/25/2021	Payee name PayPal	
Amount (\$) 765.92	Payee address; City; State; Zip Code 12312 Port Grace Blvd La Vista, NE 76592	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Service Charges	Description Service Charge
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Courage	Office sought Council District 9 Office held N/A

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 19 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/25/2021	5 Payee name Alamo Mailing		
6 Amount (\$) 10094.84	7 Payee address; City; State; Zip Code 13114 Lookout Run San Antonio, TX 78250		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising		(b) Description Mailers
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/26/2021	Payee name Carmen Torres		
Amount (\$) 210.00	Payee address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/26/2021	Payee name Stacy Gillespie		
Amount (\$) 180.00	Payee address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 20 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/26/2021	5 Payee name Maria Williams		
6 Amount (\$) 180.00	7 Payee address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Campaign Services		(b) Description Phone banking
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/26/2021	Payee name Jacob Marshall		
Amount (\$) 180.00	Payee address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/26/2021	Payee name Anyka H Bumgarner		
Amount (\$) 240.00	Payee address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 21 of 22	2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Date 5/26/2021	5 Payee name Rosalinda Ramos		
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code 8230 Meado Sun St San Antonio, TX 78270		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Campaign Services		(b) Description Phone banking
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/26/2021	Payee name Rosemary Merino		
Amount (\$) 300.00	Payee address; City; State; Zip Code 8230 Meado Sun St San Antonio, TX 78270		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			
Date 5/26/2021	Payee name Raquel Gates		
Amount (\$) 60.00	Payee address; City; State; Zip Code PO Box 700007 San Antonio, TX 78270		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services		Description Phone banking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name John Courage Office sought Council District 9 Office held N/A			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: 22 of 22	2 FILER NAME Mr John K Courage	3 Filer ID (Ethics Commission Filers)
4 Date 5/26/2021	5 Payee name Herlinda Torres	
6 Amount (\$) 210.00	7 Payee address; City; State; Zip Code 619 North Hackberry San Antonio, TX 78202	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Campaign Services	(b) Description Phone banking
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Courage	Office sought Council District 9 Office held N/A

Date 5/26/2021	Payee name Mark Niedenberger		
Amount (\$) 165.00	Payee address; City; State; Zip Code 400 Bitters Rd #1511 San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services	Description Phone banking	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Courage	Office sought Council District 9	Office held N/A

Date 5/26/2021	Payee name Michelle McBurney		
Amount (\$) 120.00	Payee address; City; State; Zip Code 2926 War Feather San Antonio, TX 78238		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Campaign Services	Description Phone banking	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Courage	Office sought Council District 9	Office held N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense
Fees
Food/Beverage Expense
Gifts/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 F2: 1 of 1	2 FILER NAME Mr John K Courage	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 0
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5 Date	6 Payee name
---------------	---------------------

7 Amount (\$)	8 Payee address; City; State; Zip Code
----------------------	---

9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F3:
1 of 1

2 FILER NAME

Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom investment is purchased

.....
6 Address of person from whom investment is purchased; City; State; Zip Code

7 Description of investment

8 Amount of investment (\$)

Date

Name of person from whom investment is purchased

.....
Address of person from whom investment is purchased; City; State; Zip Code

Description of investment

Amount of investment (\$)

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense
Fees
Food/Beverage Expense
Gifts/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 F4: 1 of 1	2 FILER NAME Mr John K Courage	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0
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5 Date	6 Payee name
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7 Amount (\$)	8 Payee address; City; State; Zip Code
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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 G: 1 of 1		2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)	
4 Date 5/1/2021		5 Payee Name Tilo Mexican Restaurant			
6 Amount (\$) 788.86 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 12403 West Ave San Antonio, TX 78216			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Election Party	
		(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
<input type="checkbox"/> Reimbursement from political contributions intended					
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description	
		<input type="checkbox"/> Check if travel outside of Texas, complete schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
<input type="checkbox"/> Reimbursement from political contributions intended					
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description	
		<input type="checkbox"/> Check if travel outside of Texas, complete schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
<input type="checkbox"/> Reimbursement from political contributions intended					
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description	
		<input type="checkbox"/> Check if travel outside of Texas, complete schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
<input type="checkbox"/> Reimbursement from political contributions intended					
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description	
		<input type="checkbox"/> Check if travel outside of Texas, complete schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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 H: 1 of 1	2 FILER NAME Mr John K Courage	3 Filer ID (Ethics Commission Filers)
4 Date	5 Business name	
6 Amount (\$)	7 Business address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: 1 of 1	2 FILER NAME Mr John K Courage	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)	(b) Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

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INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1 of 1

2 FILER NAME

Mr John K Courage

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom amount is received

8 Amount (\$)

6 Address of person from whom amount is received; City; State; Zip Code

7 Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

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IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: 1 of 1
2 FILER NAME Mr John K Courage		3 Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
5 Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <div><input type="checkbox"/> Schedule A2</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule B(J)</div> <div><input type="checkbox"/> Schedule C2</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F1</div> <div><input type="checkbox"/> Schedule F2</div> <div><input type="checkbox"/> Schedule F4</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule COH-UC</div> <div><input type="checkbox"/> Schedule B-SS</div> </div>		
6 Dates of travel	7 Name of person(s) traveling	
	8 Departure city or name of departure location	
	9 Destination city or name of destination location	
10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <div><input type="checkbox"/> Schedule A2</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule B(J)</div> <div><input type="checkbox"/> Schedule C2</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F1</div> <div><input type="checkbox"/> Schedule F2</div> <div><input type="checkbox"/> Schedule F4</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule COH-UC</div> <div><input type="checkbox"/> Schedule B-SS</div> </div>		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <div><input type="checkbox"/> Schedule A2</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule B(J)</div> <div><input type="checkbox"/> Schedule C2</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F1</div> <div><input type="checkbox"/> Schedule F2</div> <div><input type="checkbox"/> Schedule F4</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule COH-UC</div> <div><input type="checkbox"/> Schedule B-SS</div> </div>		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <div><input type="checkbox"/> Schedule A2</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule B(J)</div> <div><input type="checkbox"/> Schedule C2</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F1</div> <div><input type="checkbox"/> Schedule F2</div> <div><input type="checkbox"/> Schedule F4</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule COH-UC</div> <div><input type="checkbox"/> Schedule B-SS</div> </div>		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	

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CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.
•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

C/OH NAME
Mr John K Courage

Filer ID (Ethics Commission Filers)

SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder

FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are not an officeholder. ••

A. CAMPAIGN FUNDS

Check only one:

- ☐ I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- ☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

- ☐ I do not retain assets purchased with political contributions or interest or other income from political contributions.
- ☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

OFFICEHOLDER

•• Complete this section *only* if you are an officeholder. ••

- ☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder