

Supplemental Report Officeholder

FORM Cover Sheet SR

1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Jaynie	MI	2. Total Pages Filed: 13
	NICKNAME	LAST Schultz	SUFFIX	3. Office Held Council District 11
4. SUPPLEMENTAL REPORT TYPE	<div style="display: flex; justify-content: space-between;"> c January 15 c 30th day before election c Runoff c 15th day after campaign treasurer appointment (officeholder only) </div> <div style="display: flex; justify-content: space-between;"> <input checked="" type="checkbox"/> July 15 c 8th day before election c Exceeded \$500 limit c Final Report </div>			
5. PERIOD / COVERED	4/27/2023 THROUGH 6/30/2023			
6. ELECTION	<div style="display: flex; justify-content: space-between;"> Month Day Year </div> <div style="display: flex; justify-content: space-between;"> 5/6/2023 </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> c Primary c Runoff <input checked="" type="checkbox"/> General c Special c N/A </div>			
7. OFFICE-HOLDER	CONTRIBUTION TOTALS	1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 0.00
	EXPENDITURE TOTALS	3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00
		4. TOTAL OFFICEHOLDER EXPENDITURES		\$ 0.00
8. POLITICAL (Campaign)	CONTRIBUTION TOTALS	5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 8,545.00
	EXPENDITURE TOTALS	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 0.00
		8. TOTAL POLITICAL EXPENDITURES		\$ 56,586.22
9. OFFICEHOLDER FUNDS USED FOR CAMPAIGN PURPOSES		9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIBUTIONS USED FOR CAMPAIGN EXPENDITURES DURING THE REPORTING PERIOD		\$ 0.00
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <p>10. AFFIDAVIT</p> <p style="margin-top: 20px;">AFFIX NOTARY STAMP / SEAL ABOVE</p> </div> <div style="width: 55%; text-align: center;"> <p>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.</p> <p style="margin-top: 20px;">***ELECTRONICALLY CERTIFIED***</p> <p>_____ Signature of Candidate or Officeholder</p> </div> </div>				
<p>Sworn to and subscribed before me, by the said <u>Jaynie Schultz</u>, this the <u>7th</u> day of <u>July</u>, 20 <u>23</u>, to certify which, witness my hand and seal of office.</p>				
<div style="display: flex; justify-content: space-between;"> <div>Signature of officer administering oath</div> <div>Printed name of officer administering oath</div> <div>Title of officer administering oath</div> </div>				

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 1 of 4
2 FILER NAME Jaynie Schultz		3 Filer ID (Ethics Commission Filers)
4 Date 06/19/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patricia Meehan 6 Contributor address; City; State; Zip Code 7041 Yamini Drive Dallas, TX 75230	7 Amount of contribution (\$) 10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/19/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patricia Meehan Contributor address; City; State; Zip Code 7041 Yamini Drive Dallas, TX 75230	Amount of contribution (\$) 10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/11/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buddy Cramer Contributor address; City; State; Zip Code 3508 Haynie Ave Dallas, TX 75205	Amount of contribution (\$) 1000.00
Restaurant Owner Principal occupation / Job title (See Instructions)		Katy Trail Ice House Employer (See Instructions)
Date 05/10/2023 Campaign Contribution Consultant	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff Carey Contributor address; City; State; Zip Code 300 E Round Grove Road Lewisville, TX 75067	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Self Employed 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.		

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2 of 4
2 FILER NAME Jaynie Schultz		3 Filer ID (Ethics Commission Filers)
4 Date 05/05/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Demetris Sampson 6 Contributor address; City; State; Zip Code P.O. Box 763834 Dallas, TX 75376	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/01/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carol Donovan Contributor address; City; State; Zip Code 6509 Malcolm Drive Dallas, TX 75214	Amount of contribution (\$) 500.00
Attorney Principal occupation / Job title (See Instructions)		Carol Crabtree Donovan, PC Employer (See Instructions)
Date 05/01/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy Korenvaes Contributor address; City; State; Zip Code 5423 Park Lane Dallas, TX 75220	Amount of contribution (\$) 1000.00
Requested Principal occupation / Job title (See Instructions)		Requested Employer (See Instructions)
Date 05/01/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Chafetz Contributor address; City; State; Zip Code 12006 De Or Drive Dallas, TX 75230	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 4

2 FILER NAME

Jaynie Schultz

3 Filer ID (Ethics Commission Filers)

4 Date

04/30/2023

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Terri and Alan Greenspan

7 Amount of contribution (\$)

500.00

6 Contributor address;

17010 Preston Bend Drive

City;

Dallas, TX 75248

State; Zip Code

Dentist

8 Principal occupation / Job title (See Instructions)

Children's Dental Specialists

9 Employer (See Instructions)

Date

04/28/2023

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Roy Choi

Amount of contribution (\$)

1000.00

Contributor address;

5909 Luther Ln.

City;

Dallas, TX 75225

State; Zip Code

CEO

Principal occupation / Job title (See Instructions)

Champions Group Inc.

Employer (See Instructions)

Date

04/28/2023

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Maggie Parker

Amount of contribution (\$)

150.00

Contributor address;

1954 Cedar Crest Boulevard

City;

Dallas, TX 75203

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/28/2023

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Debra Polsky

Amount of contribution (\$)

25.00

Contributor address;

15221 Berry Trail

City;

Dallas, TX 75248

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 4 of 4
2 FILER NAME Jaynie Schultz		3 Filer ID (Ethics Commission Filers)
4 Date 04/27/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steve Baker 6 Contributor address; City; State; Zip Code 9815 Kingsway Avenue Dallas, TX 75230	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/27/2023 Campaign Contribution Consultant	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff Carey Contributor address; City; State; Zip Code 300 East Round Grove Road Lewisville, TX 75067 Self Employed	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/30/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dallas Firefighters Association Public Safety Committee Contributor address; City; State; Zip Code 10956 Audelia Rd Dallas, TX 75243	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
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.		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 8	2 FILER NAME Jaynie Schultz	3 Filer ID (Ethics Commission Filers)
4 Date 05/10/2023	5 Payee name Leaven Strategies Group	
6 Amount (\$) 5000.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 205 Cimarron Trl Irving, TX 75063	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description Fundraising Consultant
	(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 05/10/2023	Payee name Murphy Nasica	
Amount (\$) 5000.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 815 A Brazos Street Suite 304 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign Services
	<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 05/09/2023	Payee name Murphy Nasica	
Amount (\$) 1246.35 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 815 A Brazos Street Suite 304 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign Services
	<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		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 8	2 FILER NAME Jaynie Schultz	3 Filer ID (Ethics Commission Filers)
4 Date 05/08/2023	5 Payee name Murphy Nasica	
6 Amount (\$) 2708.80 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 815 A Brazos Street Suite 304 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Campaign Services
	(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 05/03/2023	Payee name NGP VAN	
Amount (\$) 159.90 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 655 15th St NW Washington, DC 20005	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Software
	<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 05/05/2023	Payee name Murphy Nasica	
Amount (\$) 8983.41 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 815 A Brazos Street Suite 304 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign Services
	<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		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 8		2 FILER NAME Jaynie Schultz		3 Filer ID (Ethics Commission Filers)	
4 Date 05/02/2023		5 Payee name Murphy Nasica			
6 Amount (\$) 534.52 Campaign Funds for Campaign Expenditures		7 Payee address; 815 A Brazos Street Suite 304 Austin, TX 78701 City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Campaign Services	
		(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 05/02/2023		Payee name Murphy Nasica			
Amount (\$) 569.94 Campaign Funds for Campaign Expenditures		Payee address; 815 A Brazos Street Suite 304 Austin, TX 78701 City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description Campaign Services	
		<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 05/02/2023		Payee name Murphy Nasica			
Amount (\$) 3000.00 Campaign Funds for Campaign Expenditures		Payee address; 815 A Brazos Street Suite 304 Austin, TX 78701 City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description Campaign Services	
		<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	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4 of 8	2 FILER NAME Jaynie Schultz	3 Filer ID (Ethics Commission Filers)
4 Date 05/02/2023	5 Payee name Murphy Nasica	
6 Amount (\$) 4000.00 Campaign Funds for Campaign Expenditures	7 Payee address; 815 A Brazos Street Suite 304 Austin, TX 78701 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Campaign Services
	(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 05/02/2023	Payee name Murphy Nasica	
Amount (\$) 9178.35 Campaign Funds for Campaign Expenditures	Payee address; 815 A Brazos Street Suite 304 Austin, TX 78701 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign Services
	<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 05/01/2023	Payee name Leaven Strategies Group	
Amount (\$) 2000.00 Campaign Funds for Campaign Expenditures	Payee address; 205 Cimarron Trl Irving, TX 75063 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Fundraising Consultant
	<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
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5 of 8	2 FILER NAME Jaynie Schultz	3 Filer ID (Ethics Commission Filers)
4 Date 05/16/2023	5 Payee name Constant Contact	
6 Amount (\$) 47.97 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Email Software
	(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 06/16/2023	Payee name Constant Contact	
Amount (\$) 47.97 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Email Software
	<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 05/09/2023	Payee name Field Wins LLC	
Amount (\$) 2494.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 13521 Janwood Ln Farmers Branch, TX 75234	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Field Program
	<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
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6 of 8	2 FILER NAME Jaynie Schultz	3 Filer ID (Ethics Commission Filers)
4 Date 05/08/2023	5 Payee name Field Wins LLC	
6 Amount (\$) 2500.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 13521 Janwood Ln Farmers Branch, TX 75234	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Field Program
	(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 06/30/2023	Payee name Anedot Inc.	
Amount (\$) 406.34 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Credit Card Processing Fees
	<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 05/12/2023	Payee name Specs Wines, Spirits & Finer Foods	
Amount (\$) 592.56 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 9500 N Central Expy Dallas, TX 75231	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Election Night Event
	<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 POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7 of 8	2 FILER NAME Jaynie Schultz	3 Filer ID (Ethics Commission Filers)
4 Date 05/10/2023	5 Payee name Spectrum Promotions	
6 Amount (\$) 1416.11 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 2305 E Belt Line Rd Suite 130 Carrollton, TX 75006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Swag
	(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 05/25/2023	Payee name Elizabeth De Leon	
Amount (\$) 1500.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 534 Parkhurst Dr Dallas, TX 75218	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign Services
	<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 05/02/2023	Payee name Field Wins LLC	
Amount (\$) 4200.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 13521 Janwood Ln Farmers Branch, TX 75234	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Field Program
	<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
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8 of 8	2 FILER NAME Jaynie Schultz	3 Filer ID (Ethics Commission Filers)
4 Date 05/08/2023	5 Payee name Enchiladas Restaurant	
6 Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures	7 Payee address; 7050 Greenville Ave Dallas, TX 75231 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Election Night Event
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED