CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

		and the second sec					
The C/OH instruction (2 Total pages filed: 6						
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST YASMIN	OFFICE USE ONLY					
NAME		e e e ki e e e ette kindjerkregere e e	Date Received				
	NICKNAME LAST WAGNER	SUFFIX					
	WAGNER						
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 11213 S BAY LN AUSTIN TX 78739						
Change of Address							
5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION					
OFFICEHOLDER	(512) 923-2138		Date Hand delivered or Date Postmarked				
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST WILLIAM	MI	Receipt # Amount \$				
NAME	NICKNAME LAST	SUFFIX	Date Processed				
	WAGNER		Date Imaged				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT 11213 S BAY LN AUSTIN TX 78739	SUITE #: CITY; STATE;	ZIP CODE				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 528-8400	EXTENSION					
9 REPORT TYPE	January 15 30th day befor		15th day after campaign treasurer appointment (Officeholder Only)				
	X July 15 8th day before	election Exceeded \$500 limit	Final Report (Attach C/OH - FR)				
10 PERIOD	Month Day Year	Month	Day Year				
COVERED	1 1 2019	THROUGH 6	30 2019				
11 ELECTION	ELECTION DATE	ELECTION TYPE	NY OF BALL				
	Month Day Year Prima	ary Runoff Other Description					
	/ / Gene						
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known))				
	AUSTIN ISD TRUSTEE, DISTRICT 7						
GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME YAS	MIN WAGNER	15	5 Filer ID (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CAN	NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDIT DIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WIT INSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS URES.	HOUT THE CANDIDATE'S OR OFFICEHOLDER'S		
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages					
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZI			
		POLITICAL CONTRIBUTIONS R THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$		
EXPENDITURE TOTALS		3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED			
	4. TOTAL	POLITICAL EXPENDITURES	\$ 345.88		
CONTRIBUTION BALANCE	5. TOTAL OF REF	DAY \$ 4261.86			
OUTSTANDING LOAN TOTALS	6. TOTAL LAST D	^{HE} \$			
18 AFFIDAVIT	<u>.</u>	n			
			erjury, that the accompanying report is rmation required to be reported by me		
NOTAH ID# 13 State Comm.Ex	EYES-KITCH Y PUBLIC 1470585 of Texas p. 02-28-2022 DUT BOND MP / SEAL ABOVE	under Title 15, Election Code.	2 lidate or Officeholder		
Sworn to and subsc day of Spanner	0	by the said <u>JESMIN</u> <u>Mener</u> to certify which witness my hand and seal of office.	, this the5		
Mary DA	enn	MarieT. Reyes Kiton	Exectory -Trus		
Signature of officer	administering oath	Printed name of officer administering oath	Title of officer administering oat		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	ommission Filers)						
21	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE						
1.		S					
2.		\$					
з.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$			
4.		SCHEDULE E: LOANS		\$			
5.	×	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$ 345.88			
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	S			
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
9.	9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS						
10.	10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH						
11.	11. SCHEDULE 1: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS						
12.	12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS \$						
		•					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politics Credt Card Payment	vertising Expense Event Expense Loan Repayment/Reimbursement counting/Banking Fees Office Overhead/Rental Expense nsulting Expense Food/Beverage Expense Polling Expense ntributions/Donations Made By Gilt/Awards/Memorials Expense Printing Expense andidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor			rhead/Rental Expense pense pense /ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
			ins now to c	omplete this form.		
1 Total pages Schedule F1:					3 Filer ID (Ethics Commission Filers)	
3 (1 of 3)		IIN S WAGNER				
4 Date	5 Payee n					
1/29/2019	WIX.C		1910 191 N			
6 Amount (\$) 15.98	Amount (\$) 7 Payee address; City; State; Zip Code 15.98 500 TERRY A FRANCOIS BLVD SAN FRANCISO CA 94158					
8 PURPOSE OF EXPENDITURE	PURPOSE OF ADVERTISING EXPENSE Check if travel outside of Texas. Complete Schedule T.					
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held						
Date	Payee na	ame				
3/1/2019	WIX.COM					
Amount (\$)	Amount (\$) Payee address; City; State; Zip Code					
15.98	15.98 500 TERRY A FRANCOIS BLVD SAN FRANCISO CA 94158					
PURPOSE	Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T					
EXPENDITURE	OF ADVERTSING EXPENSE Check if Austin, TX, officeholder living expense					
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH					Office held	
Date	Payee n	ате				
3/28/2019						
Amount (\$)	Payee a	ddress; City; State;	Zip Code			
15.98 500 TERRY A FRANCOIS BLVD SAN FRANCISO CA 94158						
	Categor	y (See Categories listed at the top of th	is schedule)	Description		
PURPOSE OF EXPENDITURE	ADVERTSING EXPENSE					
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		date / Officeholder name		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Accounting/Banking Consulting Expense Contributions/Donations Made By		Expense leverage Expense vards/Memorials Expense Services Instruction Guide explain	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME		.		3 Filer ID (Ethics Commission Filers)	
3 (2 of 3)	YASMIN WAC	SNER				
4 Date 4/5/2019	5 Payee name ANNIE'S LIS	r				
6 Amount (\$)	7 Payee address:		Zip Code	.		
50.00	PO BOX 303277 AUSTIN, TX 78703					
8	(a) Category (See Ca	ategories listed at the top of this	schedule)	(b) Description		
PURPOSE OF EXPENDITURE	CONTRIBUTIONS/DONATIONS MADE BY OFFICERHOLDER					
9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held Office held					Office held	
Date	Date Payee name					
4/29/2019 EMGAGE PAC						
Amount (\$) Payee address; City; State; Zip Code						
100.00	100.00 1140 3RD ST NE, 2ND FLOOR, WASHINGTON, DC 20002					
	Category (See Ca	ategories listed at the top of this	schedule)	Description		
PURPOSE				Check if travel ou	tside of Texas. Complete Schedule T.	
EXPENDITURE	OF CONTRIBUTIONS/DONATIONS MADE Check if Austin, TX, officeholder living expense EXPENDITURE BY OFFICERHOLDER Check if Austin, TX, officeholder living expense					
Complete ONLY if direct Candidate / Officeholder name expenditure to benefit C/OH			Office sought	Office held		
Date	Payee name		3.175			
5/1/2019						
Amount (\$)	Payee address;	City; State; 2	Zip Code			
15.98 500 TERRY A FRANCOIS BLVD SAN FRANCISO CA 94158						
	Category (See Ca	ategories listed at the top of this	schedule)	Description		
PURPOSE	Check if travel outside of Texas. Complete Schedule T.					
OF EXPENDITURE	RE ADVERTISING EXPENSE					
Complete <u>ONLY</u> if direct expenditure to benefit C/O		fficeholder name		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Accounting/Banking Fees Office Overhead/Rental Expense Transp Consulting Expense Food/Beverage Expense Polling Expense Travel Consulting Expense Gitt/Awards/Memoriats Expense Printing Expense Travel Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Other (Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)			
Crour Galor aynon	Credit Card Payment The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	2 FILER NAM	16			3 Filer ID (Ethics Commission Filers)		
3 (3 of 3)	YASMIN	WAGNER					
4 Date	5 Payee nam	B					
5/20/2019	EMGAGE	PAC					
6 Amount (\$)	7 Payee addr	ess; City; State; Z	ip Code				
100.00	00 1140 3RD ST NE, 2ND FLOOR, WASHINGTON, DC 20002						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description CONTRIBUTIONS/DONATIONS MADE Check if travel outside of Texas. Complete Schedule T. BY OFFICERHOLDER Check if Austin, TX, officeholder living expense						
9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expanditure to benefit C/OH Candidate / Officeholder name Office sought Office held							
Date Payee name							
5/29/2019	WIX.COM						
Amount (\$) Payee address; City; State; Zip Code							
15.98	5.98 500 TERRY A FRANCOIS BLVD SAN FRANCISO CA 94158						
PURPOSE	Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T.						
OF EXPENDITURE	ADVERTISING EXPENSE						
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				Office held			
Date	Payee nam	10			31. 		
6/20/2019	6/20/2019 WIX.COM						
Amount (\$) Payee address; City; State; Zip Code							
15.98 500 TERRY A FRANCOIS BLVD SAN FRANCISO CA 94158							
Category (See Calegories listed at the top of this schedule) Description PURPOSE Check if travel outside of Texas. Complete Schedule T.							
EXPENDITURE	OF EXPENDITURE ADVERTISING EXPENSE Check If Austin, TX, officeholder living expense						
Complete <u>ONLY</u> if direct expenditure to benefit C/O		e / Officeholder name		Office sought	Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED							