CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	Kevin Michael Foster		15 Filer ID (Ethics Commission Filers)			
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER, THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
	SPECIFIC	COMMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TREASURER NAME				
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS				
17 CONTRIBUTION TOTALS		D POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOAN OF LOANS OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$0.00			
	2 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$13,66					
EXPENDITURE TOTALS	3 TOTAL UNITEMIZE	3 TOTAL UNITEMIZED POLITICAL EXPENDITURES				
	4 TOTAL POLITICAL E	EXPENDITURES	\$1 ,951.12			
CONTRIBUTION BALANCE	5 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$10,139.					
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD	\$0.00			
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.						
AFFIX NOTARY S	TAMP / SEAL ABOVE	Signature of Cand	idate or Officeholder			
Sworn to and subscr	ibed before me, by the said	KEYIN MICHAEL FOSTER	, this the			
14 H day of	14 day of JULY 20 20 to certify which, witness my hand and seal of office.					
20018		AVID T. SHAW NOT	ARY PUBLIC			
Signature of officer adm		nted name of officer administering oath Title	of officer administering oath			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

-	The C/OH Instruction	Guide explains how	to complete thi	s form.	1. Filer ID (Ethics Commis	ssion Filers)	2. Total pages	filed:
3	CANDIDATE/ OFFICEHOLDER	MS/MRS/MR	FIRST Kevin M	ichael		MI		ISE ONLY
	NAME	NICKNAME	LAST	iciiaci		SUFFIX	Date Received	
			Foster					
4	CANDIDATE/	ADDRESS /PO BOX:	APT/SUITE#	CITY	STATE:	ZIP CODE	1	
	OFFICEHOLDER MAILING ADDRESS Change of Address	5500 Evans Avenue	i	Austin	TX	78751	Date Hand-delivered o	or Date Postmarked
_		AREA CODE	PHONE NUMBER		EXTENSIO	N	Receipt #	Amount \$
5	CANDIDATE/ OFFICEHOLDER PHONE							
6	CAMPAIGN	MS/MRS/MR	FIRST			MI	Date Processed	
	TREASURER NAME		Dusty				Date Imaged	
		NICKNAME	LAST			SUFFIX		
			Harshma	n				
7	CAMPAIGN	STREET ADDRESS (NO PO	D BOX PLEASE): AP	T/SUITE#	CITY	STATE:	ZIP CODE	
	TREASURER ADDRESS (Residence or Business)	4116 Camacho St			Austin	TX	78723	
8	CAMPAIGN	AREA CODE	PHONE NUMBE	R	EXTENSIO	N		
	TREASURER PHONE	(512) 67	0-6344					
9	REPORT TYPE	☐ January 15		efore election		noff	appointment	er campaign tresurer (officeholder only) Attach- COH-FR)
_		Month Day	Year			porting limit Month	Day Year	
10	PERIOD COVERED	01/01/2020		THR	OUGH		06/30/2020	
11	ELECTION	ELECTION DAT Month Day 11/3/2020	Year	ELECTION T Primary General	F	Runoff C	Other	
12	OFFICE	OFFICE HELD (if any)			1;	3 OFFICE SOUGH	IT (if known)	
	GO TO PAGE 2							

SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

19.	FILER NAME Kevin Michael Foster	20. FILER ID (Ethics Commission Filers)
21,	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTALS AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$13,663.99
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$0.00
4.	SCHEDULE E: LOANS	\$1,000.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIE	BUTIONS \$1,951.12
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTI	RIBUTIONS \$0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$0.00
10,	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUS	SINESS OF C/OH \$0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONT	TRIBUTIONS \$0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS TO FILER	RETURNED \$0.00

SCHEDULE A1

The In	struction Guide explains how	to comple	te this fo	rm.	Total pages Schedule A1: not available
FILER NAME Kevin Michael					3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of contribution (\$)
06/09/2020	Kevin Foster				\$10.53
	6. Contributor address;	City;	State;	ZIP Code	
	5500 Evans Ave Austin, TX 787	51-1329			
8. Principal occu	pation / Job title (See Instruction	ns)	-	9 Employ	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution (\$)
06/09/2020	Dusty Harshman				\$206.70
	6. Contributor address;	City;	State;	ZIP Code	
	4116 Camacho St Austin, TX 787	723-5388			
8. Principal occu	pation / Job title (See Instruction	ns)		9 Employ	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution (\$)
06/09/2020	Zachary Price				\$5.00
	6. Contributor address;	City;	State;	ZIP Code	
	7007 Reese Ln Austin, TX 78757	7-1917			
8. Principal occu	pation / Job title (See Instruction	ıs)		9 Employ	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution (\$)
06/10/2020	Theo Androus				\$100.00
	6. Contributor address;	City;	State;	ZIP Code	
	2208 Russell Rd Alexandria, VA	22301-1532	2		
8. Principal occu	pation / Job title (See Instruction	ıs)		9 Employ	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution (\$)
06/10/2020	Katharine Arb				\$127.70
	6. Contributor address;	City;	State;	ZIP Code	
	11500 January Dr Austin, TX 78	753-2920			
8. Principal occu	pation / Job title (See Instruction	ns)		9 Employ	yer (See Instructions)

SCHEDULE A1

The li	nstruction Guide explains how	to complete	e this fo	rm.	Total pages Schedule A1: not available	
FILER NAME Kevin Michae					3. Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of contribution (\$)	
06/10/2020	Amy Averett				\$50.0	0
	6. Contributor address;	City;	State;	ZIP Code		
	2706 Dancy St Austin, TX 78722	2-2316				
8. Principal occ	upation / Job title (See Instruction	ns)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of contribution (\$)	
06/10/2020	Patricia Buchholtz				\$51.20	0
	6. Contributor address;	City;	State;	ZIP Code		
	4025 Camacho St Austin, TX 78	723-5376				
8. Principal occ	upation / Job title (See Instruction	ns)		9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of contribution (\$)	
06/10/2020	April Clark				\$20.60	0
	6. Contributor address;	City;	State;	ZIP Code		
	618 Lavaca St Austin, TX 78701	-2994				
8. Principal occi	upation / Job title (See Instruction	ns)		9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributor	out-of-sta	ate PAC		7. Amount of contribution (\$)	
06/10/2020	Lydia Clay				\$1,020.20)
	6. Contributor address;	City;	State;	ZIP Code		
	1608 Elmhurst Dr Austin, TX 78	741-2510				
8. Principal occu	upation / Job title (See Instruction	ns)		9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributor	out-of-sta	ate PAC		7. Amount of contribution (\$)	
06/10/2020	Brenda Fierro				\$20.60)
	6. Contributor address;	City;	State;	ZIP Code		
	2307 Devonshire Dr Austin, TX	78723-2027	3			
8. Principal occu	upation / Job title (See Instruction	ıs)		9 Employ	ver (See Instructions)	

SCHEDULE A1

The Ins	struction Guide explains how to complete this form.	Total pages Schedule A1: not available
2. FILER NAME Kevin Michael I	Foster	3. Filer ID (Ethics Commission Filers)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/10/2020	Ilya Fischhoff	\$20.60
	6. Contributor address; City; State; ZIP Code	
	12 Elm St Pawling, NY 12564-1047	
8. Principal occup	pation / Job title (See Instructions) 9 Emp	oloyer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/10/2020	Theodore Eric Foster	\$1,020.20
	6. Contributor address; City; State; ZIP Code	
	405 1st St S Apt 511 Jacksonville Beach, FL 32250-6789	
8. Principal occup	pation / Job title (See Instructions) 9 Emp	oloyer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/10/2020	Shaleiah Fox	\$125.00
	6. Contributor address; City; State; ZIP Code	
	6304 Peggy St Austin, TX 78723-1935	
8. Principal occup	pation / Job title (See Instructions) 9 Emp	oloyer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/10/2020	Sarah Gaventa	\$25.70
	6. Contributor address; City; State; ZIP Code	
	4108 Gochman St Austin, TX 78723-4549	
8. Principal occup	pation / Job title (See Instructions) 9 Emp	oloyer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/10/2020	Genevieve Gonse Dell	\$76.70
	6. Contributor address; City; State; ZIP Code	
	5706 Avenue D Austin, TX 78752-4504	
8. Principal occup	pation / Job title (See Instructions) 9 Emp	oloyer (See Instructions)

SCHEDULE A1

The Ins	struction Guide explains how to complete this form	Total pages Schedule A1: not available				
2. FILER NAME Kevin Michael	Foster		3. Filer ID (Ethics Commission Filers)			
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)			
06/10/2020	Ann Graham		\$50.00			
	6. Contributor address; City; State;	ZIP Code				
	3815 Avenue H Austin, TX 78751-4718					
8. Principal occup	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)			
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)			
06/10/2020	Katherine Harte		\$20.60			
	6. Contributor address; City; State;	ZIP Code				
	5900 London Dr Austin, TX 78745-3400					
8. Principal occup	8. Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)					
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)			
06/10/2020	Elizabeth Heard		\$102.20			
	6. Contributor address; City; State;	ZIP Code				
	10708 Pratt Ln Austin, TX 78748-3032					
8. Principal occup	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)			
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)			
06/10/2020	Barbara Hines		\$510.20			
1	6. Contributor address; City; State;	ZIP Code				
	1405 Wilshire Blvd Austin, TX 78722-1128					
8. Principal occup	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)			
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)			
06/10/2020	Bret Kadison		\$1,000.00			
	6. Contributor address; City; State;	ZIP Code				
	1504 Brackenridge St Austin, TX 78704-2431					
8. Principal occup	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)			

SCHEDULE A1

The Ins	struction Guide explains how to complete this form.	Total pages Schedule A1: not available	
2. FILER NAME Kevin Michael	Foster	3	3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC	7	7. Amount of contribution (\$)
06/10/2020	Michael McGovern		\$500.00
	6. Contributor address; City; State; ZI	P Code	
	2024 Antone St Austin, TX 78723-5444		
8. Principal occu	pation / Job title (See Instructions)	9 Employe	er (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7	7. Amount of contribution (\$)
06/10/2020	Leila Melhem		\$51.20
	6. Contributor address; City; State; ZI	P Code	
	2017 Mccloskey St Austin, TX 78723-5387	1	
8. Principal occu	pation / Job title (See Instructions)	9 Employe	er (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7	7. Amount of contribution (\$)
06/10/2020	Nancy Mims		\$127.70
	6. Contributor address; City; State; ZI	P Code	
	3812 Duval St Austin, TX 78751-5106		
8. Principal occup	pation / Job title (See Instructions)	9 Employe	er (See Instructions)
4. Date	Full name of contributor Out-of-state PAC	7	7. Amount of contribution (\$)
06/10/2020	Nancy Neavel		\$75.00
	6. Contributor address; City; State; ZII	P Code	
	47 Woodstone Sq Austin, TX 78703-1159		
8. Principal occup	pation / Job title (See Instructions)	9 Employe	er (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7	7. Amount of contribution (\$)
06/10/2020	Marina Peterson		\$5.30
	6. Contributor address; City; State; ZII	P Code	
	5109 Avenue G Austin, TX 78751-2021		
8. Principal occup	pation / Job title (See Instructions)	9 Employe	er (See Instructions)

SCHEDULE A1

The Ins	struction Guide explains how to complete this form	Total pages Schedule A1: not available		
2. FILER NAME Kevin Michael	Foster		3. Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
06/10/2020	Matthew Pope		\$125.00	
	6. Contributor address; City; State;	ZIP Code		
	2235 E 6th St Apt 211 Austin, TX 78702-3443			
8. Principal occu	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
06/10/2020	Carolynn Reed		\$30.80	
	6. Contributor address; City; State; 2	ZIP Code		
	1608 Sanchez St Austin, TX 78702-1641			
8. Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)				
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
06/10/2020	Daniel Riegel		\$50.00	
	6. Contributor address; City; State; 2	ZIP Code		
	500 E Riverside Dr Apt 228 Austin, TX 78704-1342			
8. Principal occu	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
06/10/2020	Anita Robertson		\$25.00	
	6. Contributor address; City; State; 2	ZIP Code		
	2005 Zach Scott St Austin, TX 78723-5399		<i>F</i>	
8. Principal occup	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)	
4. Date	Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
06/10/2020	Rutg Rodríguez		\$102.20	
	6. Contributor address; City; State; 2	ZIP Code		
	2649 Windmill View Rd El Cajon, CA 92020-1050			
8. Principal occuj	pation / Job title (See Instructions)	9 Employ	er (See Instructions)	

SCHEDULE A1

The Ins	struction Guide explains how to complete this fo	Total pages Schedule A1: not available		
FILER NAME Kevin Michael	Foster		3. Filer ID (Ethics Commission Filer	s)
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)	
06/10/2020	Susie Roselle			\$20.00
	6. Contributor address; City; State;	ZIP Code		4
	4005 Avenue D Austin, TX 78751-4615		N.	
8. Principal occu	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)	
06/10/2020	Daniel Rourke			\$127.70
	6. Contributor address; City; State;	ZIP Code		
	300 Bowie St Apt 2602 Austin, TX 78703-4665			
8. Principal occup	pation / Job title (See Instructions)	9 Employ	rer (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)	
06/10/2020	Allison Sands			\$20.00
	6. Contributor address; City; State;	ZIP Code		
	9510 Marsh Dr Austin, TX 78748-5970			
8. Principal occup	pation / Job title (See Instructions)	9 Employ	er (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
06/10/2020	W Selby			\$127.70
	6. Contributor address; City; State;	ZIP Code		
	908 Ramona St Austin, TX 78704-1644			
8. Principal occup	pation / Job title (See Instructions)	9 Employ	er (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC _		7. Amount of contribution (\$)	
06/10/2020	Brigid Shea			\$100.00
	6. Contributor address; City; State;	ZIP Code		
	2604 Geraghty Ave Austin, TX 78757-2328			
8. Principal occup	pation / Job title (See Instructions)	9 Employ	er (See Instructions)	

SCHEDULE A1

The Ins	struction Guide explains how to complete this form.	Total pages Schedule A1: not available		
FILER NAME Kevin Michael	Foster	3. Filer ID (Ethics Commission Filers)		
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)		
06/10/2020	Maury Sullivan	\$20.00		
	6. Contributor address; City; State; ZIP Code	e		
	4309 Speedway Austin, TX 78751-3727			
8. Principal occu	pation / Job title (See Instructions) 9 Emp	ployer (See Instructions)		
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)		
06/10/2020	Sarah Thoorens	\$20.60		
	6. Contributor address; City; State; ZIP Code	э		
	511 W Croslin St Austin, TX 78752-2437			
8. Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)				
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)		
06/10/2020	Jonathan Willbanks	\$125.00		
	6. Contributor address; City; State; ZIP Code	e		
	2203 Erica Kaitlin Ln Cedar Park, TX 78613-4553			
8. Principal occup	pation / Job title (See Instructions) 9 Emp	ployer (See Instructions)		
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)		
06/11/2020	Sarah Batson	\$61.40		
	6. Contributor address; City; State; ZIP Code	e		
	201 Rabern Ct Apt 813 Belton, TX 76513-1977	×		
8. Principal occup	pation / Job title (See Instructions) 9 Emp	ployer (See Instructions)		
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)		
06/11/2020	Flynn A. Lee	\$125.00		
	6. Contributor address; City; State; ZIP Code	9		
	PO Box 300293 Austin, TX 78703-0006			
8. Principal occup	pation / Job title (See Instructions) 9 Emp	oloyer (See Instructions)		

SCHEDULE A1

The Ins	struction Guide explains how to co	Total pages Schedule A1: not available			
2. FILER NAME Kevin Michael	Foster			3. Filer ID (Ethics Commission F	ilers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/11/2020	David Mintz				\$250.00
	6. Contributor address; C	City; State;	ZIP Code		
	2795 Northland Dr Austin, TX 78756-	1021		2	
8. Principal occu	pation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/11/2020	Wanwei Simonsen				\$500.00
	6. Contributor address; C	City; State;	ZIP Code		
	6142 Lago Vista Dr Corpus Christi, TX	X 78414-6342			
8. Principal occu	pation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/11/2020	Joah Spearman				\$50.00
	6. Contributor address; C	City; State;	ZIP Code		
	PO Box 6149 Austin, TX 78762-6149				
8. Principal occu	pation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/11/2020	Terry Woodroffe				\$20.00
	6. Contributor address; C	City; State;	ZIP Code		
	3001 Lyons Rd Austin, TX 78702-363	8			
8. Principal occup	pation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/13/2020	David King				\$127.70
	6. Contributor address; C	City; State;	ZIP Code		
	1808 Kerr Ave Austin, TX 78704-1429)			
8. Principal occup	pation / Job title (See Instructions)		9 Employ	yer (See Instructions)	

SCHEDULE A1

The Ins	struction Guide explains how to complete this form.	Total pages Schedule A1: not available
2. FILER NAME Kevin Michael	Foster	3. Filer ID (Ethics Commission Filers)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/13/2020	Steven Polunsky	\$25.70
	6. Contributor address; City; State; ZIP 0	Code
	8006 Meadowlake Dr W Northport, AL 35473-8183	
8. Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/13/2020	Kathie Tovo	\$127.70
	6. Contributor address; City; State; ZIP 0	Code
	809 W 32nd St Austin, TX 78705-2115	
8. Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/14/2020	John Wright	\$20.00
	6. Contributor address; City; State; ZIP 0	Code
	12332 Havelock Dr Austin, TX 78759-3022	
8. Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/15/2020	Kevin Foster	\$1.00
	6. Contributor address; City; State; ZIP 0	Code
	5500 Evans Ave Austin, TX 78751-1329	
8. Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/15/2020	Trent Sharp	\$100.00
	6. Contributor address; City; State; ZIP C	Code
	7108 Via Dono Dr Austin, TX 78749-2764	
8. Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)

SCHEDULE A1

The Instruction Guide explains how to complete this form.				Total pages Schedule A1: not available	
FILER NAME Kevin Michael	Foster			3. Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/15/2020	Jaime Witts			\$10.40	
	6. Contributor address;	City; State;	ZIP Code		
	2710 S 1st St Austin, TX 78704-54	487			
8. Principal occu	pation / Job title (See Instructions	s)	9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/16/2020	Laura Yeager			\$255.20	
	6. Contributor address;	City; State;	ZIP Code		
	501 W 33rd St Austin, TX 78705-	2320			
8. Principal occu	pation / Job title (See Instructions	3)	9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/20/2020	Keri Slater			\$50.00	
	6. Contributor address;	City; State;	ZIP Code		
	1708 New York Ave Austin, TX 7	8702-2122			
8. Principal occup	pation / Job title (See Instructions	5)	9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/22/2020	Wendy Smith			\$50.00	
	6. Contributor address;	City; State;	ZIP Code		
	1616 W Summit Ave San Antonio	, TX 78201-5011			
8. Principal occup	pation / Job title (See Instructions	5)	9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/23/2020	Macario Hernandez			\$50.00	
	6. Contributor address;	City; State;	ZIP Code		
	2416 Southwood Dr Dallas, TX 75	233-2838			
8. Principal occup	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)	

SCHEDULE A1

The Instruction Guide explains how to complete this form.				Total pages Schedule A1: not available	
FILER NAME Kevin Michael	Foster			3. Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/23/2020	Jenny Stern			\$	20.00
	6. Contributor address;	City; State;	ZIP Code		
	2306 W 10th St Austin, TX 78703-38	345			
8. Principal occu	pation / Job title (See Instructions)		9 Employ	er (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/24/2020	Kevin Cokley			\$1	00.00
	6. Contributor address;	City; State;	ZIP Code		
	7000 William Wallace Way Austin, T	TX 78754-5809			
8. Principal occu	pation / Job title (See Instructions)		9 Employ	er (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/24/2020	Eliot Fisher			\$	18.56
	6. Contributor address;	City; State;	ZIP Code		
	3111 Parker Ln Austin, TX 78741-69	92			
8. Principal occu	pation / Job title (See Instructions)		9 Employ	er (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/24/2020	Tequia Hicks Delgado			\$1	27.70
	6. Contributor address;	City; State;	ZIP Code		
	3625 Hansberry Ct NE Washington, I	DC 20018-3845			
8. Principal occu	pation / Job title (See Instructions)		9 Employ	er (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC	_	7. Amount of contribution (\$)	
06/24/2020	William Hopkins			\$1	25.00
	6. Contributor address;	City; State;	ZIP Code		
	3324 Silkgrass Bnd Austin, TX 78748	8-5630			
8. Principal occu	pation / Job title (See Instructions)		9 Employ	er (See Instructions)	

SCHEDULE A1

The In	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: not available
FILER NAME Kevin Michael					3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution (\$)
06/24/2020	Rich Reddick				\$125.00
	6. Contributor address;	City;	State;	ZIP Code	
	2601 Lou John St Austin, TX 78	727-1243			
8. Principal occu	upation / Job title (See Instruction	ns)		9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution (\$)
06/25/2020	Jennifer Johns				\$75.00
	6. Contributor address;	City;	State;	ZIP Code	
	134 Huron St Decatur, GA 30030	0-1863			
8. Principal occu	pation / Job title (See Instruction	ns)		9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution (\$)
06/26/2020	Samuel Adair				\$1,020.20
	6. Contributor address;	City;	State;	ZIP Code	
	2300 Tom Miller St Austin, TX 7	78723-5382			
8. Principal occu	pation / Job title (See Instruction	ns)		9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of contribution (\$)
06/26/2020	Carolyn Goldston				\$100.00
	6. Contributor address;	City;	State;	ZIP Code	
	9306 Great Hills Trl Unit 23 Aus	tin, TX 7875	59-7121		
8. Principal occu	pation / Job title (See Instruction	ns)		9 Employ	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of contribution (\$)
06/27/2020	Sarah Cook				\$51.20
	6. Contributor address;	City;	State;	ZIP Code	
	4613 Duval St Austin, TX 78751	-3205			
8. Principal occu	pation / Job title (See Instruction	is)		9 Employ	yer (See Instructions)

SCHEDULE A1

The In	struction Guide explains how to complete this form.	Total pages Schedule A1: not available
FILER NAME Kevin Michael	Foster	3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/28/2020	Caroline Badinelli	\$25.70
	6. Contributor address; City; State; ZIP Code	
	1111 Fieldcrest Dr Austin, TX 78704-5341	
8. Principal occu	pation / Job title (See Instructions) 9 Empl	oyer (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/28/2020	Andrea Black	\$51.20
	6. Contributor address; City; State; ZIP Code	
	1910 E 8th St Austin, TX 78702-3430	
8. Principal occu	pation / Job title (See Instructions) 9 Empl	oyer (See Instructions)
4. Date	Full name of contributor	7. Amount of contribution (\$)
06/28/2020	Brian Donovan	\$50.00
	6. Contributor address; City; State; ZIP Code	
	206 Moss St Highland Park, MI 48203-2680	
8. Principal occu	pation / Job title (See Instructions) 9 Empl	oyer (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/28/2020	Jillian Griffin	\$20.60
	6. Contributor address; City; State; ZIP Code	
	5209 Downs Dr Austin, TX 78721-2203	
8. Principal occu	pation / Job title (See Instructions) 9 Empl	oyer (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/28/2020	Lauren Hammonds	\$10.40
	6. Contributor address; City; State; ZIP Code	
	612 W 33rd St Austin, TX 78705-2212	
8. Principal occu	pation / Job title (See Instructions) 9 Empl	oyer (See Instructions)

SCHEDULE A1

The Ins	struction Guide explains how to complete this form.	Total pages Schedule A1: not available
2. FILER NAME Kevin Michael	Foster	3. Filer ID (Ethics Commission Filers)
4. Date	Full name of contributor	7. Amount of contribution (\$)
06/28/2020	Matthew Love	\$51.20
	6. Contributor address; City; State; ZIP Code	
	4312 Scales St Austin, TX 78723-5396	
8. Principal occup	pation / Job title (See Instructions) 9 Employ	yer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/28/2020	Sarah McKibben	\$51.20
	6. Contributor address; City; State; ZIP Code	
	601 Texas Ave Austin, TX 78705-1727	
8. Principal occup	pation / Job title (See Instructions) 9 Employ	yer (See Instructions)
4. Date	Full name of contributor	7. Amount of contribution (\$)
06/28/2020	Mark McKim	\$10.00
	6. Contributor address; City; State; ZIP Code	
	2906 E Martin Luther King Jr Blvd Apt 2405 Austin, TX 78702-1670	
8. Principal occup	pation / Job title (See Instructions) 9 Employ	yer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/28/2020	Angela Pires	\$30.00
	6. Contributor address; City; State; ZIP Code	
	1103 Olive St Austin, TX 78702-1939	
8. Principal occup	pation / Job title (See Instructions) 9 Employ	yer (See Instructions)
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/28/2020	Robiaun Rogers Charles	\$1,000.00
	6. Contributor address; City; State; ZIP Code	
	339 S Candler St Decatur, GA 30030-3746	
8. Principal occup	pation / Job title (See Instructions) 9 Employ	yer (See Instructions)

SCHEDULE A1

The Instruction Guide explains how to complete this form.			Total pages Schedule A1: not available	
FILER NAME Kevin Michael	Foster		3. Filer ID (Ethics Commission Filers))
4. Date	Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
06/29/2020	Gillian Brody-Wilcox			\$20.00
	6. Contributor address; City; State;	ZIP Code		
	3911 Grayson Ln Austin, TX 78722-1327			
8. Principal occu	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
06/29/2020	Terri Conrad			\$20.00
	6. Contributor address; City; State;	ZIP Code		
	129 Saturnia Dr Georgetown, TX 78628-2094			
8. Principal occu	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
06/29/2020	Roxanne Evans			\$50.00
	6. Contributor address; City; State;	ZIP Code		
	7300 Meadowood Dr Austin, TX 78723-1620			
8. Principal occu	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
06/29/2020	Helen Gaebler		\$	100.00
	6. Contributor address; City; State;	ZIP Code		
	504 Harris Ave Austin, TX 78705-2514			
8. Principal occup	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution (\$)	
06/29/2020	Yulanda Glutz			\$50.00
	6. Contributor address; City; State;	ZIP Code		
	PO Box 87082 Houston, TX 77287-7082			
8. Principal occup	pation / Job title (See Instructions)	9 Employ	ver (See Instructions)	

SCHEDULE A1

The Instruction Guide explains how to complete this form.				Total pages Schedule A1: not available	
FILER NAME Kevin Michael	Foster			3. Filer ID (Ethics Commission Fi	lers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/29/2020	Bergeron Harris				\$51.20
	6. Contributor address;	City; State;	ZIP Code		
	112 Willow Run Georgetown, TX 7	8633-5442			
8. Principal occu	pation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/29/2020	Michael Hurewitz				\$20.60
	6. Contributor address;	City; State;	ZIP Code		
	4012 Maplewood Ave Austin, TX 7	8722-1518			
8. Principal occu	pation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/29/2020	Michael Jones				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	2045 Zach Scott St Austin, TX 7872	23-5399			
8. Principal occu	pation / Job title (See Instructions)		9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/29/2020	Jenna Martin				\$250.00
	6. Contributor address;	City; State;	ZIP Code		
	4313 Mattie St Austin, TX 78723-54	166			
8. Principal occu	pation / Job title (See Instructions)		9 Employ	ver (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/29/2020	Cynthia McCollum				\$102.20
	6. Contributor address;	City; State;	ZIP Code		
	1910 Running Brook Dr Austin, TX	78723-3446			
8. Principal occu	pation / Job title (See Instructions)		9 Employ	ver (See Instructions)	

SCHEDULE A1

The Ins	struction Guide explains how to complete this form.	Total pages Schedule A1; not available	
FILER NAME Kevin Michael I	Foster	3. Filer ID (Ethics Commission Filers)	
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)	
06/29/2020	Holly Tachovsky	\$1,000.00	
	6. Contributor address; City; State; ZIP Code		
	4521 Red River St Austin, TX 78751-4022		
8. Principal occup	pation / Job title (See Instructions) 9 Emplo	oyer (See Instructions)	
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)	
06/29/2020	Judy Townsend	\$51.20	
	6. Contributor address; City; State; ZIP Code		
	3913 Sahm St Austin, TX 78723-5445		
8. Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)	
06/29/2020	Benjamin Wright	\$10.40	
	6. Contributor address; City; State; ZIP Code		
	503 Zennia St Austin, TX 78751-1931		
8. Principal occup	pation / Job title (See Instructions) 9 Emplo	oyer (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)	
06/30/2020	Christopher Blythe	\$10.40	
	6. Contributor address; City; State; ZIP Code		
	4225 Mattie St Austin, TX 78723-5425		
8. Principal occup	pation / Job title (See Instructions) 9 Emplo	oyer (See Instructions)	
4. Date	5. Full name of contributorout-of-state PAC	7. Amount of contribution (\$)	
06/30/2020	Louis Carr	\$102.20	
	6. Contributor address; City; State; ZIP Code		
	5709 Taylor Draper Cv Unit A Austin, TX 78759-3961		
8. Principal occup	pation / Job title (See Instructions) 9 Emplo	oyer (See Instructions)	

SCHEDULE A1

The Instruction Guide explains how to complete this form.				Total pages Schedule A1: not available	
2. FILER NAME Kevin Michael	Foster			3. Filer ID (Ethics Commission File	ers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2020	Lee Christy				\$50.00
	6. Contributor address;	City; State;	ZIP Code		
	810 Colonial Park Blvd Austin, TX	78745-1790			
8. Principal occu	pation / Job title (See Instructions))	9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2020	Daniel Galewsky				\$20.00
	6. Contributor address;	City; State;	ZIP Code		
	2012 Kenwood Ave Austin, TX 78	704-4438			
8. Principal occu	pation / Job title (See Instructions))	9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2020	Guadalupe Guajardo				\$15.00
	6. Contributor address;	City; State;	ZIP Code		
	3810 Daffodil Ave Laredo, TX 780	46-8520			
8. Principal occu	pation / Job title (See Instructions))	9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2020	Elizabeth Hilton				\$100.00
	6. Contributor address;	City; State;	ZIP Code		
	4001 Mendez St Austin, TX 78723-	-4542			
8. Principal occu	pation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
06/30/2020	Joseph Johnson				\$20.60
	6. Contributor address;	City; State;	ZIP Code		
	9613 Covey Ridge Ln Austin, TX 7	78758-5805			
8. Principal occu	pation / Job title (See Instructions)		9 Employ	yer (See Instructions)	

SCHEDULE A1

The Ins	struction Guide explains how to complete this form.	Total pages Schedule A1: not available
FILER NAME Kevin Michael I	Foster	3. Filer ID (Ethics Commission Filers)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/30/2020	Nicole Johnson	\$51.20
	6. Contributor address; City; State; ZIP Code	
	18819 Billings Ave Carson, CA 90746-2132	
8. Principal occup	pation / Job title (See Instructions) 9 Emplo	oyer (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/30/2020	Tiffany Puett	\$50.00
	6. Contributor address; City; State; ZIP Code	
	4017 Brookview Rd Austin, TX 78722-1215	
8. Principal occup	pation / Job title (See Instructions) 9 Emplo	oyer (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
06/30/2020	Anita Robertson	\$10.00
	6. Contributor address; City; State; ZIP Code	
í	2005 Zach Scott St Austin, TX 78723-5399	
8. Principal occup	pation / Job title (See Instructions) 9 Emplo	oyer (See Instructions)
4. Date	Full name of contributor Out-of-state PAC	7. Amount of contribution (\$)
06/30/2020	Adam Sparks	\$20.00
	6. Contributor address; City; State; ZIP Code	
	3907 Cherrywood Rd Austin, TX 78722-1219	
8. Principal occup	pation / Job title (See Instructions) 9 Emplo	oyer (See Instructions)
4. Date	Full name of contributor	7. Amount of contribution (\$)
06/30/2020	Lisa Thompson	\$50.00
	6. Contributor address; City; State; ZIP Code	
	7009 Northeast Dr Austin, TX 78723-1439	
8. Principal occup	pation / Job title (See Instructions) 9 Emplo	oyer (See Instructions)

SCHEDULE A1

The Instruction Guide explains how to complete this form.				Total pages Schedule A1: not available	
FILER NAME Kevin Michael	Foster				3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of contribution (\$)
06/30/2020	Deborah Trejo				\$50.00
	6. Contributor address;	City;	State;	ZIP Code	
	1717 Briar St Austin, TX 78704-3	3421			
8. Principal occup	pation / Job title (See Instruction	s)		9 Employ	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of contribution (\$)
06/30/2020	Jose Vela				\$100.00
	6. Contributor address;	City;	State;	ZIP Code	
	1407 Ridgemont Dr Austin, TX 7	8723-2548			
8. Principal occup	pation / Job title (See Instruction	s)		9 Employ	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of contribution (\$)
06/30/2020	Anthony Webster				\$35.00
	6. Contributor address;	City;	State;	ZIP Code	
	3912 Hermalinda St Austin, TX 7	8723-4532			
8. Principal occup	pation / Job title (See Instruction	s)		9 Employ	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution (\$)
06/30/2020	Kim Wine				\$50.00
	6. Contributor address;	City;	State;	ZIP Code	
	4004 Teaff St Austin, TX 78723-5	5711			
8. Principal occup	pation / Job title (See Instruction	s)		9 Employ	yer (See Instructions)

LOANS SCHEDULE E

The Ins	struction Guide explains how to complete this fo	orm.	Total pages Sch not available	edule E:	
FILER NAME Kevin Michael	Foster		3. Filer ID (Ethics C	Commission Filers)	
4. TOTAL OF U	INITEMIZED LOANS			\$0.00	
5. Date of loan 06/01/2020	7. Name of lenderout-of-state PAC Kevin Foster			9. Loan Amount \$1,000.00	
6 Is lender a financial Institution?	5500 Evans Ave Austin, TX 78751-1329			10. Interest rate 0.00% 11. Maturity date 11/30/2020	
12. Principal occupation / Job title (See Instructions) 13 E		13 Employer	Employer (See Instructions)		
14. Description of Collateral 1		15 Check if personal funds were deposited into political account			
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)	
rot applicable	18 Guarantor address; City; Stat	e; ZIP	Code		
20 Principal Occu	upation (See Instructions)	21 Emplo	oyer (See Instruction	s)	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

	EXPENDITURE CATEGOR	RIES FOR B	OX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Office Overhead/I Polling Expense Printing Expense Salaries/Wages/C	Contract Labor	Transpor Expense r Travel In Travel O Other (er	
1. Total pages Schedule F1:	2. FILER NAME	3	Filer ID (Et	hics Commission Filers)
	Kevin Michael Foster			
4 Date	5 Payee name			
04/26/2020	Andrew Thomas			
6 Amount \$50.00	7 Payee address; City; 1411 Gracy Farms Ln Apt 116 Austin, TX 78758		ate:	Zip Code
8	(a) Category (See categories listed at the top of this sche	dule) (b) De	escription	
PURPOSE OF	Advertising Expense Videography			
EXPENDITURE				
	Check if travel outside of Texas, complete Schedule T			TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office s	ought	Office held
4 Date	5 Payee name			
05/14/2020	HostGator.com			
6 Amount \$101.64	7 Payee address; City; 2500 Ridgepoint Dr Austin, TX 78754-5250	Sta	ate:	Zip Code
8	(a) Category (See categories listed at the top of this sche	_{dule)} (b) De	escription	
PURPOSE OF	Advertising Expense	Webs	site Registration	and Hosting
EXPENDITURE			[O1 1 1/ A 1/ 3	FV . W. h. h. h. h. h. h.
9 Complete ONLY if direct	Check if travel outside of Texas, complete Schedule T	Office s		TX, officeholder living expense Office held
expenditure to benefit C/OH	Candidate/Officeholder name	Office s	ougni	Office field
4 Date	5 Payee name			
05/15/2020	Envato			
6 Amount \$61.00	7 Payee address; City; PO Box 16122 Collins Street West Melbourne, V		ate:	Zip Code
8 PURPOSE OF	(a) Category (See categories listed at the top of this sche Advertising Expense		escription Ipress Website T	`emplate
EXPENDITURE	Check if travel outside of Taylor and the Cale in the Taylor		Chook if A	TV officeholder living surrous
9 Complete ONLY if direct expenditure to benefit C/OH	Check if travel outside of Texas, complete Schedule T Candidate/Officeholder name	Office s		CX, officeholder living expense Office held
	ATTACH ADDITIONAL COPIES OF THIS S	SCHEDULE	AS NEEDE	E D

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Candidate/Officeholder/Political Committee	Event Expense Office Overhead/Renta Fees Polling Expense Printing Expense Gift/Awards/Memorials Expense Salaries/Wages/Contractions	Trai Exp act Labor Trai Trai	citation/Fundraising Expense Insportation Equipment & Related Insportation Equipment & Related In District In District In Out of District In Experiment In Insteed In Insteed Insport Insteed Insport Insteed		
Credit Card Payment	The Instruction Guide explains how to co	mplete this form	l.		
Total pages Schedule F1:	FILER NAME Kevin Michael Foster	3. Filer I	D (Ethics Commission Filers)		
4 Date	5 Payee name				
06/01/2020	Andrew Thomas				
6 Amount \$350.00	7 Payee address; City;	State:	Zip Code		
	1411 Gracy Farms Ln Apt 116 Austin, TX 78758-222	9			
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Website Design			
EXPENDITURE	Check if travel outside of Texas, complete Schedule T		ustin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
4 Date	5 Payee name				
06/11/2020	University Federal Credit Union (UFCU)				
6 Amount \$13.48	7 Payee address; City; 8303 N Mopac Expy # A105 Austin, TX 78759-8374	State:	Zip Code		
8	(a) Category (See categories listed at the top of this schedule)	(b) Description	1		
PURPOSE OF	Accounting/Banking	Bank Fee (Chec	ks)		
EXPENDITURE	_				
	Check if travel outside of Texas, complete Schedule T		ustin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
4 Date	5 Payee name				
06/15/2020	Kevin Foster				
6 Amount \$1,000.00	7 Payee address; City; 5500 Evans Ave Austin, TX 78751-1329	State:	Zip Code		
8	(a) Category (See categories listed at the top of this schedule)	(b) Description	1		
OF PURPOSE	Loan Repayment/Reimbursement	Startup Loan Re	payment		
EXPENDITURE	Check if travel outside of Texas, complete Schedule T	Check if Au	ustin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS NE	EDED		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 Office Overhead/Rental Fees Polling Expense Food/Beverage Expense Printing Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Legal Services The Instruction Guide explains how to complete this form		Transporta Expense Travel In D Travel Out Other (ente	2003/2007/2007	
1. Total pages Schedule F1:	2. FILER NAME	3	Filer ID (Ethic	cs Commission Filers)	
	Kevin Michael Foster				
4 Date	5 Payee name				
06/16/2020	NGP VAN				
6 Amount \$150.00	7 Payee address; City; 1445 New York Ave NW Ste 200 Washington, D				
	The Tolk Tolk Tive Tive Ste 200 Washington, 2	C 20005 215	Ŭ		
PURPOSE OF	, , , , , , , , , , , , , , , , , , ,		escription Fee - June 2020		
EXPENDITURE	Check if travel outside of Texas, complete Schedule T		Check if Austin, TX.	, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office s	ought	Office held	
4 Date	5 Payee name				
06/26/2020	Nicole Johnson				
6 Amount \$125.00	7 Payee address; City; 18819 Billings Ave Carson, CA 90746-2132	Sta	ate:	Zip Code	
PURPOSE OF	(a) Category (See categories listed at the top of this sched		escription Design		
EXPENDITURE	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office s	ought	Office held	
4 Date	5 Payee name				
06/26/2020	Christina Lin Puentes				
6 Amount \$100.00	7 Payee address; City; 1411 Gracy Farms Ln Apt 116 Austin, TX 78758		ate:	Zip Code	
PURPOSE OF	(a) Category (See categories listed at the top of this sched		escription ography		
EXPENDITURE	Check if travel outside of Texas, complete Schedule T		Check if Austin, TX,	officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office s	ought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS S	SCHEDULE	AS NEEDEL)	