

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.	1 Filer ID	2 Total pages filed: 7
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3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Jessica	MI	<div style="border: 2px solid blue; padding: 5px;"> <p style="text-align: center; margin: 0;">OFFICE USE ONLY</p> <p style="margin: 0;">Date Received RECEIVED 10:52 am JN OCT 30 2018</p> <p style="margin: 0; color: blue; text-align: center;">WILCO ELECTIONS</p> </div>
	NICKNAME	LAST Tiedt	SUFFIX	

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 13301 Tamayo Dr Austin, TX 78729	Date Hand-delivered or Date Postmarked
	Receipt #	Amount
Date Processed		Date Imaged

5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Jessica	MI Lea
	NICKNAME	LAST Tiedt	SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 13301 Tamayo Dr Austin, Tx 78729
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7 CAMPAIGN TREASURER PHONE	AREA CODE 572	PHONE NUMBER 900 1622	EXTENSION
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8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			

9 PERIOD COVERED	Month Day Year 09/28/2018	THROUGH	Month Day Year 10/27/2018
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10 ELECTION	ELECTION DATE Month Day Year 11/06/2018		ELECTION TYPE		
			<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other
		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special		

11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) County Clerk District Williamson
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GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

2 of 7

13 C / OH NAME Tiedt, Jessica	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

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
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	
COMMITTEE CAMPAIGN TREASURER NAME	
COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	146.86
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	4,196.86
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	128.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	3,352.78
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	7,815.04

17 AFFADAVIT

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.



J. Tiedt

 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jessica Tiedt, this the 30th day of October, 20 18, to certify which, witness my hand and seal of office.

Kaylan Brown Kaylan Brown Notary
 Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Tiedt, Jessica		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,196.86
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,000.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 128.00
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/2 Rpt: 4/7
2 FILER NAME Tiedt, Jessica		3 Filer ID
4 Date 09/30/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armendariz, Daniel	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 1819 Barilla Mountain Trail Round Rock , TX 78664	
8 Principal occupation / Job title (See Instructions) Senior Technical Support Engineer		9 Employer (See Instructions) MobileIron
Date 10/15/2018	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00370007) Democracy for America	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code P.O. Box 1717 Burlington, VT 05402	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffy, Mary	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code 329 Park Place Dr Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) none
Date 09/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Everett, Paula	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 9703 Moorberry St. Austin, TX 78729	
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) none
Date 10/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Debra	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2610 Crestfield Place round rock, TX 78681	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/7
2 FILER NAME Tiedt, Jessica		3 Filer ID
4 Date 10/24/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reedholm, Joe	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 114 Juniper Berry Georgetown, TX 78633		
8 Principal occupation / Job title (See Instructions) none		9 Employer (See Instructions) none
Date 10/21/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Carrie	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2112 Spring Hollow Path Round Rock, TX 78681		
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) none
Date 10/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Marie	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 104 John Thomas Drive Georgetown, TX 78628		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/21/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Western Wilco Dems Club WWDC	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 6633 E. HWY 290 Suite 104 Austin, TX 78723		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 6/7	
2 FILER NAME Tiedt, Jessica		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/09/2018	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Democratic Party	8 Amount of contribution (\$) \$1,000.00	9 In-kind contribution description Voter File Access
	7 Contributor address; City; State; Zip Code 1106 Lavaca, Suite 100 Austin, TX 78701	<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)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officenolder/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: Sch: 1/1 Rpt: 7/7	2 FILER NAME Tiedt, Jessica	3 Filer ID	
4 Date 10/21/2018	5 Payee name VFW #10427		
6 Amount (\$) \$128.00	7 Payee address; City; State; Zip Code 8760 Ranch Rd 224 Leander, TX 78641		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Site Rental and Drinks for Meet the Candidates Event for Veterans	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officenolder name	Office sought	Office held