

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 (Ethics Commission Filers)		2 Total pages filed:									
3 CANDIDATE / OFFICEHOLDER NAME	<div style="display: flex; justify-content: space-between;"> MS / MRS / MR FIRST MI </div> <div style="display: flex; justify-content: space-between;"> Mr. Kelly </div> <hr style="border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> NICKNAME LAST SUFFIX </div> <div style="display: flex; justify-content: space-between;"> Higgins </div>				OFFICE USE ONLY Date Received <div style="font-size: 1.5em; color: blue; font-weight: bold;">Received OCT 11 2022 Elections Office</div> <div style="color: blue; font-family: cursive; font-size: 1.2em;">BMC</div>								
	<div style="display: flex; justify-content: space-between;"> ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE </div> <div style="display: flex; justify-content: space-between;"> 395 Rocky Springs Rd., Wimberley, Texas 78676 </div>												
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address					Date Hand-delivered or Date Postmarked								
5 CANDIDATE / OFFICEHOLDER PHONE	<div style="display: flex; justify-content: space-between;"> AREA CODE PHONE NUMBER EXTENSION </div> <div style="display: flex; justify-content: space-between;"> (512) 839-3343 </div>												
6 CAMPAIGN TREASURER NAME	<div style="display: flex; justify-content: space-between;"> MS / MRS / MR FIRST MI </div> <div style="display: flex; justify-content: space-between;"> Mr. William </div> <hr style="border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> NICKNAME LAST SUFFIX </div> <div style="display: flex; justify-content: space-between;"> Bill Hines </div>				Receipt # Amount \$								
					Date Processed								
				Date Imaged									
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<div style="display: flex; justify-content: space-between;"> STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE </div> <div style="display: flex; justify-content: space-between;"> 1307 Nueces, Austin, Texas 78701 </div>												
8 CAMPAIGN TREASURER PHONE	<div style="display: flex; justify-content: space-between;"> AREA CODE PHONE NUMBER EXTENSION </div> <div style="display: flex; justify-content: space-between;"> (512) 297-6075 </div>												
9 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> January 15</div> <div style="width: 50%;"><input checked="" type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded Modified Reporting Limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>												
10 PERIOD COVERED	<div style="display: flex; justify-content: space-between;"> <div> Month Day Year 7 / 1 / 22 </div> THROUGH <div> Month Day Year 9 / 30 / 22 </div> </div>												
11 ELECTION	<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> ELECTION DATE Month Day Year 11 / 8 / 22 </div> <div style="width: 60%;"> ELECTION TYPE <div style="display: flex; justify-content: space-between;"> Primary Runoff Other Description </div> <div style="display: flex; justify-content: space-between;"> <input checked="" type="checkbox"/> General Special </div> </div> </div>												
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) Criminal District Attorney Hays County Texas										
14 NOTICE FROM POLITICAL COMMITTEE(S)	<p style="font-size: 0.8em; margin: 0;">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.</p> <table border="1" style="width:100%; border-collapse: collapse; font-size: 0.8em;"> <tr> <td style="width:20%; padding: 2px;">COMMITTEE TYPE</td> <td style="padding: 2px;">COMMITTEE NAME</td> </tr> <tr> <td style="padding: 2px;">GENERAL</td> <td style="padding: 2px;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="padding: 2px;">SPECIFIC</td> <td style="padding: 2px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td style="padding: 2px;"></td> <td style="padding: 2px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>					COMMITTEE TYPE	COMMITTEE NAME	GENERAL	COMMITTEE ADDRESS	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE	COMMITTEE NAME												
GENERAL	COMMITTEE ADDRESS												
SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME												
	COMMITTEE CAMPAIGN TREASURER ADDRESS												
GO TO PAGE 2													

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

Kelly Higgins

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR
CONTRIBUTIONS MADE ELECTRONICALLY)

\$ 1,103.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 16,703.00

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 12,018.27

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$ 13,877.09

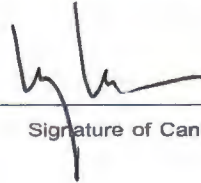
OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 0.00

18 SIGNATURE

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.



Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____,
20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Kelly Higgins, and my date of birth is March 26, 1964.

My address is 395 Rocky Springs Rd, Wimberley, TX, 78676, USA.

Executed in Hays County, State of Texas, on the 8th day of October, 2022.

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME****Kelly Higgins****20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 15,600.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 12,018.27
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

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:**15****2** FILER NAME**Kelly Higgins****3** Filer ID (Ethics Commission Filers)**4** Date**07/20/2022****5** Full name of contributor

out-of-state PAC (ID#:

Terry Cummings**6** Contributor address;

City;

State;

Zip Code

2778 Garlic Creek Dr, Buda, TX 78610**7** Amount of contribution (\$)**25.00****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

07/20/2022

Full name of contributor

out-of-state PAC (ID#:

Blain Moncrief

Contributor address;

City;

State;

Zip Code

1003 Laurel Cove, Buda, TX 78610

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2022

Full name of contributor

out-of-state PAC (ID#:

DeLisa Harris

Contributor address;

City;

State;

Zip Code

1616 Lancaster St., San Marcos, TX 78666

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/28/2022

Full name of contributor

out-of-state PAC (ID#:

Chip Shields

Contributor address;

City;

State;

Zip Code

4055 NE 9th Ave, Portland OR, 97212

Amount of contribution (\$)

25.00

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: 5
2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)
4 Date 07/05/2022	5 Full name of contributor out-of-state PAC (ID#: Jeffrey Kaufmann	7 Amount of contribution (\$) 50.00
6 Contributor address; City; State; Zip Code 407 Leisurewoods, Buda, TX 78610		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/11/2022	Full name of contributor out-of-state PAC (ID#: Mindy Webber	Amount of contribution (\$) 5.00
Contributor address; City; State; Zip Code 102 Cedar Springs Dr., Wimberley, TX 78676		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/19/2022	Full name of contributor out-of-state PAC (ID#: Raoul Belleau	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 291 Brunson Lane, Wimberley, TX 78676		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/19/2022	Full name of contributor out-of-state PAC (ID#: Don Johnson	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 2700 RR 3237 Wimberley, TX 78676		
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:

15

2 FILER NAME

Kelly Higgins

3 Filer ID (Ethics Commission Filers)**4** Date

07/03/2022

5 Full name of contributor

out-of-state PAC (ID#: _____)

Blain Moncrief

7 Amount of contribution (\$)

25.00

6 Contributor address;

City;

State;

Zip Code

1003 Laurel Cove, Buda, TX 78610

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

07/03/2022

Full name of contributor

out-of-state PAC (ID#: _____)

David Doerr

Amount of contribution (\$)

25.00

Contributor address;

City;

State;

Zip Code

1192 Sanders, Kyle, TX 78640

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/03/2022

Full name of contributor

out-of-state PAC (ID#: _____)

Brianna Salinas

Amount of contribution (\$)

25.00

Contributor address;

City;

State;

Zip Code

1111 Avalon Apt 7, San Marcos, TX 78666

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/03/2022

Full name of contributor

out-of-state PAC (ID#: _____)

Kevin Kelly

Amount of contribution (\$)

50.00

Contributor address;

City;

State;

Zip Code

1237 River Acres Drive, New Braunfels, TX 78130

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: 15
2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)
4 Date 07/03/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Alex Villalobos 6 Contributor address; City; State; Zip Code 136 Firewheel Cove, Kyle, TX 78640	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/04/2022	Full name of contributor out-of-state PAC (ID#: _____) Warren Feldman Contributor address; City; State; Zip Code 744 Rocky Loop, Crestline CA 92325	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/09/2022	Full name of contributor out-of-state PAC (ID#: _____) Debora Morris Contributor address; City; State; Zip Code 1111 Deer Lake Rd, Wimberley, TX 78676	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/10/2022	Full name of contributor out-of-state PAC (ID#: _____) Krishna Rao Contributor address; City; State; Zip Code 3310 Foster Lane, Austin, TX 78757	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:**15****2** FILER NAME**Kelly Higgins****3** Filer ID (Ethics Commission Filers)**4** Date

07/01/2022

5 Full name of contributor

out-of-state PAC (ID#: _____)

Charlie Harrison**6** Contributor address;

City;

State;

Zip Code

11 Meier Rd. Pleasant Hill, CA 94523**7** Amount of contribution (\$)**100.00****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

07/01/2022

Full name of contributor

out-of-state PAC (ID#: _____)

Matthew Handley

Contributor address;

City;

State;

Zip Code

7719 Carroll Ave, Takoma PA, MD 20912

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/02/2022

Full name of contributor

out-of-state PAC (ID#: _____)

Adina Richman

Contributor address;

City;

State;

Zip Code

6407 Lake Circle Dr., Dallas TX 75214

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/03/2022

Full name of contributor

out-of-state PAC (ID#: _____)

Russell Buyse

Contributor address;

City;

State;

Zip Code

1136 Elder Circle, Austin, TX 78733

Amount of contribution (\$)

200.00

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:

15

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

Kelly Higgins

4 Date

5 Full name of contributor

out-of-state PAC (ID#:

Beth Buyse

7 Amount of contribution (\$)

07/03/2022

6 Contributor address;

City;

State;

Zip Code

1136 Elder Cir., Austin, TX 78733

50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#:

David Wheeler

Amount of contribution (\$)

07/06/2022

Contributor address;

City;

State;

Zip Code

3003 NW Loop, San Antonio, TX 78230

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#:

R Hatch

Amount of contribution (\$)

07/03/2022

Contributor address;

City;

State;

Zip Code

48 Country Oaks, Buda, TX 78610

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#:

Hays County Democratic Party

Amount of contribution (\$)

07/22/2022

Contributor address;

City;

State;

Zip Code

P O Box 1245, Buda, TX 78610

500.00

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: 15
2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)
4 Date 07/20/2022	5 Full name of contributor Amy Grant out-of-state PAC (ID#: 6 Contributor address; 339 Oyster Creek, Buda, TX 78610 City; State; Zip Code	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/26/2022	Full name of contributor Nabina Sinha out-of-state PAC (ID#: Contributor address; 422 Oakdale Pl. NW, Washington DC 20001 City; State; Zip Code	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/28/2022	Full name of contributor Chip Shields out-of-state PAC (ID#: Contributor address; 4055 NE 9th St., Portland OR 97212 City; State; Zip Code	Amount of contribution (\$) 2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor 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.		

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: 15
2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)
4 Date 08/11/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Mindy Webber 6 Contributor address; City; State; Zip Code 102 Cedar Springs, Wimberley, TX 78676	7 Amount of contribution (\$) 5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/18/2022	Full name of contributor out-of-state PAC (ID#: _____) Heiko Stang Contributor address; City; State; Zip Code 380 Turkey Hollow, Wimberley, TX 78676	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/23/2022	Full name of contributor out-of-state PAC (ID#: _____) Michael Thoennes Contributor address; City; State; Zip Code 2704 Bryonhall Dr., Austin, TX 78745	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/31/2022	Full name of contributor out-of-state PAC (ID#: _____) Doran Sauer Contributor address; City; State; Zip Code 6117 Highlandale Dr., Austin, TX 78731	Amount of contribution (\$) 50.00
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: 15
2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)
4 Date 08/12/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Billy McNabb 6 Contributor address; City; State; Zip Code 144 E San Antonio St., San Marcos, TX 78666	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/03/2022	Full name of contributor out-of-state PAC (ID#: _____) Beth Buyse Contributor address; City; State; Zip Code 1136 Elder Circle, Austin, TX 78733	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/03/2022	Full name of contributor out-of-state PAC (ID#: _____) Marc Hill Contributor address; City; State; Zip Code 1770 St James Place, Houston, TX 77056	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor 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.		

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: 15
2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)
4 Date 08/04/2022	5 Full name of contributor out-of-state PAC (ID#: Jason Trumpler 6 Contributor address; City; State; Zip Code 7601 Hawkeye Drive, Austin, TX 78749	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/06/2022	Full name of contributor out-of-state PAC (ID#: Naomi Aberly Contributor address; City; State; Zip Code 32 Derne St, Apt 5, Boston, MA 21140	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/08/2022	Full name of contributor out-of-state PAC (ID#: Andrew Zachary Contributor address; City; State; Zip Code 603 Peacock Lane #a, Austin, TX 78704	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/09/2022	Full name of contributor out-of-state PAC (ID#: Debora Morris Contributor address; City; State; Zip Code 1111 Deer Lake Rd, Wimberley, TX 78676	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:

15

2 FILER NAME

Kelly Higgins

3 Filer ID (Ethics Commission Filers)

4 Date

08/19/2022

5 Full name of contributor

out-of-state PAC (ID#: _____)

Amy Grant

7 Amount of contribution (\$)

50.00

6 Contributor address;

City;

State;

Zip Code

339 Oyster Creek, Buda, TX 78610

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/31/2022

Full name of contributor

out-of-state PAC (ID#: _____)

Leslie Boykin

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

609 West 9th St., Austin, TX 78701

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/31/2022

Full name of contributor

out-of-state PAC (ID#: _____)

Joseph Aragon

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

1307 Highlandale Dr., Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/31/2022

Full name of contributor

out-of-state PAC (ID#: _____)

Paul Quinzi

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

5807 Avenue G, Austin, TX 78752

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:

15

2 FILER NAME

Kelly Higgins

3 Filer ID (Ethics Commission Filers)

4 Date

09/29/2022

5 Full name of contributor

out-of-state PAC (ID#:

William Hines

7 Amount of contribution (\$)

3,000.00

6 Contributor address;

City;

State;

Zip Code

1307 Nueces St., Austin, TX 78701

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Hines, Ranc & Holub

Date

09/03/2022

Full name of contributor

out-of-state PAC (ID#:

Beth Buyse

Amount of contribution (\$)

50.00

Contributor address;

City;

State;

Zip Code

1136 Elder Circle, Austin, TX 78733

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/06/2022

Full name of contributor

out-of-state PAC (ID#:

Carol McGuire

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

23 Woodstone Square, Austin, TX 78703

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/09/2022

Full name of contributor

out-of-state PAC (ID#:

Debora Morris

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

1111 Deer Lake Rd., Wimberley, TX 78676

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: 15
2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers) .
4 Date 09/01/2022	5 Full name of contributor Jesses Eugen Taylor out-of-state PAC (ID#: 6 Contributor address; 314 W 11th St., Austin, TX 78701 City; State; Zip Code	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/01/2022	Full name of contributor Donald Bird out-of-state PAC (ID#: Contributor address; 4807 Spicewood Springs, Austin, TX 78759 City; State; Zip Code	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/15/2022	Full name of contributor Billy McNabb out-of-state PAC (ID#: Contributor address; 144 E San Antonio St., San Marcos, TX 78666 City; State; Zip Code	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor 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.		

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: 15
2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)
4 Date 09/01/2022	5 Full name of contributor out-of-state PAC (ID#: _____) David White 6 Contributor address; City; State; Zip Code 608 W 12th St., Austin, TX 78701	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/01/2022	Full name of contributor out-of-state PAC (ID#: _____) Mark Hull Contributor address; City; State; Zip Code 1004 West Ave., Austin, TX 78701	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/01/2022	Full name of contributor out-of-state PAC (ID#: _____) Amber Vazquez Contributor address; City; State; Zip Code 608 W 12th St., Austin, TX 78701	Amount of contribution (\$) 2,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Vazquez Law Firm
Date 09/01/2022	Full name of contributor out-of-state PAC (ID#: _____) Kevin HigginBotham Contributor address; City; State; Zip Code P O Box 460939, Ft. Lauderdale, FL 33346	Amount of contribution (\$) 200.00
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: 15
2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)
4 Date 09/11/2022	5 Full name of contributor out-of-state PAC (ID#: Mindy Webber 6 Contributor address; City; State; Zip Code 102 Woodstone Sq, Austin, TX 78703	7 Amount of contribution (\$) 5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/19/2022	Full name of contributor out-of-state PAC (ID#: Linda Shoecraft Contributor address; City; State; Zip Code 69 Woodcreek Dr., Wimberley, TX 78676	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: Lauralee Harris Contributor address; City; State; Zip Code P O Box 1232, Kyle, TX 78640	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/28/2022	Full name of contributor out-of-state PAC (ID#: Mary Vance Contributor address; City; State; Zip Code 1413 Fairway, Kyle, TX 78640	Amount of contribution (\$) 10.00
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.		

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: 12		2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)	
4 Date 07/05/2022		5 Payee name Leah Boggs			
6 Amount (\$) 225.00		7 Payee address; c/o Sheriff's department		City; San Marcos	State; Texas 78666
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event expense		(b) Description Security		
	(c) Check if travel outside of Texas. Complete Schedule T. 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 07/06/2022		Payee name Matt Giles			
Amount (\$) 1,000.00		Payee address; c/o The Drakes		City; Austin, Texas	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expense		Description Music		
	Check if travel outside of Texas. Complete Schedule T. 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 07/07/2022		Payee name Albert Perez			
Amount (\$) 275.00		Payee address; c/o Sheriff's department		City; San Marcos, Texas	State; Zip Code 78666
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expense		Description Security		
	Check if travel outside of Texas. Complete Schedule T. 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: 12		2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)																	
4 Date 07/22/2022		5 Payee name Facebook																			
6 Amount (\$) 130.00		7 Payee address; City; State; Zip Code 1601 Willow Rd Menlo Park CA																			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense		(b) Description Social media																		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense																				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH																					
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Date</td> <td style="width:80%;">Payee name</td> </tr> <tr> <td>07/29/2022</td> <td>Ozona Bank</td> </tr> <tr> <td>Amount (\$)</td> <td>Payee address; City; State; Zip Code</td> </tr> <tr> <td>7.00</td> <td>P O Box 430 Ozona, TX 76943</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td>Category (See Categories listed at the top of this schedule)</td> <td>Description</td> </tr> <tr> <td>Accounting/banking</td> <td>Bank service charge</td> </tr> <tr> <td colspan="2">Check if travel outside of Texas. Complete Schedule T.</td> <td>Check if Austin, TX, officeholder living expense</td> </tr> </table>						Date	Payee name	07/29/2022	Ozona Bank	Amount (\$)	Payee address; City; State; Zip Code	7.00	P O Box 430 Ozona, TX 76943	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	Accounting/banking	Bank service charge	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense
Date	Payee name																				
07/29/2022	Ozona Bank																				
Amount (\$)	Payee address; City; State; Zip Code																				
7.00	P O Box 430 Ozona, TX 76943																				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description																			
	Accounting/banking	Bank service charge																			
Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense																			
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>						Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held												
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held																		
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Date</td> <td style="width:80%;">Payee name</td> </tr> <tr> <td>07/06/2022</td> <td>Daisy's EBay</td> </tr> <tr> <td>Amount (\$)</td> <td>Payee address; City; State; Zip Code</td> </tr> <tr> <td>425.00</td> <td>7951 Meadow Star San Antonio, TX 78227</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td>Category (See Categories listed at the top of this schedule)</td> <td>Description</td> </tr> <tr> <td>Advertising</td> <td>Tee shirts</td> </tr> <tr> <td colspan="2">Check if travel outside of Texas. Complete Schedule T.</td> <td>Check if Austin, TX, officeholder living expense</td> </tr> </table>						Date	Payee name	07/06/2022	Daisy's EBay	Amount (\$)	Payee address; City; State; Zip Code	425.00	7951 Meadow Star San Antonio, TX 78227	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	Advertising	Tee shirts	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense
Date	Payee name																				
07/06/2022	Daisy's EBay																				
Amount (\$)	Payee address; City; State; Zip Code																				
425.00	7951 Meadow Star San Antonio, TX 78227																				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description																			
	Advertising	Tee shirts																			
Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense																			
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>						Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held												
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: 12		2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)	
4 Date 07/07/2022		5 Payee name Actbluedonate			
6 Amount (\$) 28.21		7 Payee address: 366 Summer St.		City; Sommerville, MA	State; 02144
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/banking		(b) Description Service charge		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 07/08/2022		Payee name Facebook			
Amount (\$) 151.01		Payee address: 1601 Willow Rd		City; Menlo Park CA	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Social Media		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 07/11/2022		Payee name Vantiv eCommerce			
Amount (\$) 50.57		Payee address: 900 Chemsford St.		City; Lowell, MA	State; 01851
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/banking		Description Service fee		
	Check if travel outside of Texas. Complete Schedule T.		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: 12		2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)	
4 Date 08/02/2022		5 Payee name Google			
6 Amount (\$) 58.13		7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountainview California 94043			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense		(b) Description Social media		
	(c) Check if travel outside of Texas. Complete Schedule T. 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 08/03/2022		Payee name Vantiv eCommerce Funds Disbursement			
Amount (\$) 1,000.00		Payee address; City; State; Zip Code 900 Chemsford St Lowell, MA 01851			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution refund		Description Refund erroneous contribution		
	Check if travel outside of Texas. Complete Schedule T. 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 08/05/2022		Payee name Actbluedonate			
Amount (\$) 53.75		Payee address; City; State; Zip Code 366 Summer St Somerville, MA, 02144			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Service charge		
	Check if travel outside of Texas. Complete Schedule T. 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: 12		2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)	
4 Date 07/01/2022		5 Payee name Facebook			
6 Amount (\$) 125.00		7 Payee address; City; State; Zip Code 1601 Willow Rd Menlo Park, California			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense		(b) Description Social Media		
	(c) Check if travel outside of Texas. Complete Schedule T. 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 07/05/2022		Payee name Walmart			
Amount (\$) 44.00		Payee address; City; State; Zip Code 1015 TX 80 San Marcos, Texas 78666			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Yard sign supplies		
	Check if travel outside of Texas. Complete Schedule T. 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 07/05/2022		Payee name Google			
Amount (\$) 104.66		Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountainview, California 94043			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense		Description Social media		
	Check if travel outside of Texas. Complete Schedule T. 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: 12		2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)	
4 Date 08/09/2022		5 Payee name Vantiv eCommerce Funds			
6 Amount (\$) 109.60		7 Payee address; City; State; Zip Code 900 Chemsford St Lowell MA, 01851			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) accounting/banking		(b) Description Administrative fee		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 08/12/2022		Payee name The Salt Lick			
Amount (\$) 126.00		Payee address; City; State; Zip Code FM 1826 Driftwood, TX 18300			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food beverage expense		Description Meeting to discuss fundraising event		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 08/15/2022		Payee name Lowes			
Amount (\$) 155.14		Payee address; City; State; Zip Code 135 N Kyle, Texas 78640			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Sign brackets		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: 12	2 FILER NAME Kelly Higgins	3 Filer ID (Ethics Commission Filers)
4 Date 08/25/2022	5 Payee name Kings Feed and haardware	
6 Amount (\$) 46.54	7 Payee address; City; State; Zip Code 14210 RR 12 Wimberley, TX 78676	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Sign hardware
	(c) 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 sought Office held
Date 08/31/2022	Payee name Ozona Bank	
Amount (\$) 7.00	Payee address; City; State; Zip Code P O Box 430 Ozona, TX 76943	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Bank service fee
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/10/2022	Payee name AZ Copy and Print	
Amount (\$) 3,040.75	Payee address; City; State; Zip Code 12111 RR 12 Wimberley, TX 78676	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing	Description Campaign Signs
	Check if travel outside of Texas. Complete Schedule T. 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		

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: 12		2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)				
4 Date 08/18/2022		5 Payee name Vistaprint						
6 Amount (\$) 456.06		7 Payee address; City; State; Zip Code 275 Wyman St Waltham, MA 02451						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing		(b) Description Cards and leaflets					
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">Candidate / Officeholder name</td> <td style="width:33%; border: none;">Office sought</td> <td style="width:33%; border: none;">Office held</td> </tr> </table>						Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held						
Date 08/22/2022		Payee name Ace Hardware						
Amount (\$) 22.00		Payee address; City; State; Zip Code 13600 RR 12 Wimberley, TX 78676						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense		Description sign holders					
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">Candidate / Officeholder name</td> <td style="width:33%; border: none;">Office sought</td> <td style="width:33%; border: none;">Office held</td> </tr> </table>						Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held						
Date 08/22/2022		Payee name Craggs Lumber						
Amount (\$) 135.96		Payee address; City; State; Zip Code 16985 RR 12 Wimberley, TX 78676						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Sign supplies					
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">Candidate / Officeholder name</td> <td style="width:33%; border: none;">Office sought</td> <td style="width:33%; border: none;">Office held</td> </tr> </table>						Candidate / Officeholder name	Office sought	Office held
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: 12		2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)	
4 Date 09/26/2022		5 Payee name Spectrum Reach			
6 Amount (\$) 2,125.00		7 Payee address; 11501 Alterra Pkwy, Suite 400		City; Austin, TX	State; TX
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising		(b) Description Social media	
		(c) Check if travel outside of Texas. Complete Schedule T.		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 09/26/2022		Payee name Facebook			
Amount (\$) 175.00		Payee address; 1601 Willow Rd.		City; Menlo Park, California	State; CA
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising		Description Social media	
		Check if travel outside of Texas. Complete Schedule T.		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		Payee name			
Amount (\$)		Payee address;		City;	State; Zip Code
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description	
		Check if travel outside of Texas. Complete Schedule T.		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: 12	2 FILER NAME Kelly Higgins	3 Filer ID (Ethics Commission Filers)
4 Date 09/06/2022	5 Payee name Home Depot	
6 Amount (\$) 105.06	7 Payee address; 135 South	City; State; Zip Code Kyle, TX 78640
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Sign Frames
	(c) Check if travel outside of Texas. Complete Schedule T. 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 09/06/2022	Payee name Lowes	
Amount (\$) 107.60	Payee address; 135 North	City; State; Zip Code Kyle, TX 78640
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Sign frames
	Check if travel outside of Texas. Complete Schedule T. 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 09/06/2022	Payee name Craggs Lumber Co.	
Amount (\$) 133.33	Payee address; 16985 RR 12	City; State; Zip Code Wimberley, TX 78676
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Sign frames
	Check if travel outside of Texas. Complete Schedule T. 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: 12		2 FILER NAME Kelly Higgins		3 Filer ID (Ethics Commission Filers)	
4 Date 09/01/2022		5 Payee name AZ Copy and Print			
6 Amount (\$) 1,426.88		7 Payee address: 12111 RR 12		City; Wimberley, TX	State; TX 78676 Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing		(b) Description Campaign signs		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 09/06/2022		Payee name Craggs Lumber Co.			
Amount (\$) 3.41		Payee address: 16985 RR 12		City; Wimberley, TX	State; TX 78676 Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Sign supplies		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 09/06/2022		Payee name Natural Tribute Design			
Amount (\$) 21.65		Payee address: 12111 RR 12		City; Wimberley, TX	State; TX 78676 Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Design work		
	Check if travel outside of Texas. Complete Schedule T. 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