

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

|  |   |                     |  |
|--|---|---------------------|--|
| <b>The C/OH Instruction Guide explains how to complete this form.</b>                        |   | 1 Filer ID          | 2 Total pages filed:<br>18   |
| 3 CANDIDATE / OFFICEHOLDER NAME  | MS / MRS / MR   | FIRST<br>Jennifer   | MI   |
|  | NICKNAME  | LAST<br>Littlefield | SUFFIX   |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY;<br>5820 Harper Park Dr.<br>#49<br>Austin, TX 78735   |                     | ZIP CODE   |
|  | Date Hand-delivered or Date Postmarked  |                     |  |
|  | Receipt #   | Amount              |  |
|  | Date Processed  |                     |  |
| Date Imaged  |   |                     |  |
| 5 CAMPAIGN TREASURER NAME  | MS / MRS / MR   | FIRST               | MI   |
|  | NICKNAME  | LAST                | SUFFIX   |
| 6 CAMPAIGN TREASURER ADDRESS<br><br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE   |                     |  |
|  | 7 CAMPAIGN TREASURER PHONE<br>AREA CODE PHONE NUMBER EXTENSION  |                     |  |
| 8 REPORT TYPE  | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) |                     |  |
|  | <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)                         |                     |  |
| 9 PERIOD COVERED   | Month Day Year<br>10/25/2020  |                     | Month Day Year<br>12/05/2020   |
|  | THROUGH   |                     |  |
| 10 ELECTION  | ELECTION DATE<br>Month Day Year<br>12/15/2020   |                     | ELECTION TYPE<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |
|  | 11 OFFICE<br>OFFICE HELD (if any)   |                     | 12 OFFICE SOUGHT (if known)  |

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

2 of 18


|   |                    |
|---|--------------------|
| <b>13 C / OH NAME</b> Littlefield, Jennifer | <b>14 Filer ID</b> |
|---|--------------------|

|   |  |                       |
|---|--|-----------------------|
| <b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b><br><br><input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. |                       |
|   | <b>COMMITTEE TYPE</b><br><br><input type="checkbox"/> GENERAL<br><br><input type="checkbox"/> SPECIFIC   | <b>COMMITTEE NAME</b> |
|   | <b>COMMITTEE ADDRESS</b>   |                       |
|   | <b>COMMITTEE CAMPAIGN TREASURER NAME</b>   |                       |
|   | <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>  |                       |

|                                |   |    |           |
|--------------------------------|---|----|-----------|
| <b>16 CONTRIBUTION TOTALS</b>  | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00      |
|                                | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$ | 10,795.99 |
| <b>EXPENDITURE TOTALS</b>      | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES  | \$ | 0.00      |
|                                | 4. TOTAL POLITICAL EXPENDITURES   | \$ | 10,262.51 |
| <b>CONTRIBUTION BALANCE</b>    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  | \$ | 9,239.89  |
| <b>OUTSTANDING LOAN TOTALS</b> | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$ | 5,000.00  |

**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.

  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

\_\_\_\_\_  
Signature of officer administering      Printed name of officer administering      Title of officer administering oath

# SUBTOTALS - C/OH

|  |   |                    |                 |
|--|---|--------------------|-----------------|
| <b>18 FILER NAME</b><br>Littlefield, Jennifer    |   | <b>19 Filer ID</b> |                 |
| <b>20 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE |   |                    | SUBTOTAL AMOUNT |
| 1.   | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                           | \$                 | 10,795.99       |
| 2.   | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS             | \$                 | 0.00            |
| 3.   | <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS                                       | \$                 | 0.00            |
| 4.   | <input checked="" type="checkbox"/> SCHEDULE E: LOANS   | \$                 | 5,000.00        |
| 5.   | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS        | \$                 | 7,898.81        |
| 6.   | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                | \$                 | 0.00            |
| 7.   | <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS       | \$                 | 0.00            |
| 8.   | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                           | \$                 | 0.00            |
| 9.   | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                  | \$                 | 2,363.70        |
| 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**

|  |  |   |
|--|--|---|
| <b>The Instruction Guide explains how to complete this form.</b> |  | <b>1</b> Total pages Schedule A1:<br>Sch: 1/8 Rpt: 4/18 |
| <b>2</b> FILER NAME<br>Littlefield, Jennifer                     |  | <b>3</b> Filer ID                                       |
| <b>4</b> Date<br>11/09/2020                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Anderson, Cindy<br>.....<br><b>6</b> Contributor address; City; State; Zip Code<br>1014 Harwood Place<br><br>Austin, TX 78704 | <b>7</b> Amount of Contribution (\$)<br><br>\$263.47    |
| <b>8</b> Principal occupation / Job title (See Instructions)     |  | <b>9</b> Employer (See Instructions)                    |
| Date<br>12/02/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Barnes, Ben<br>.....<br>Contributor address; City; State; Zip Code<br>P O Box 81676<br><br>Austin, TX 78708                            | Amount of Contribution (\$)<br><br>\$316.11             |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                             |
| Date<br>11/06/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bast, Cynthia<br>.....<br>Contributor address; City; State; Zip Code<br>5820 Harper Park Dr #27<br><br>Austin, TX 78735                | Amount of Contribution (\$)<br><br>\$100.00             |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                             |
| Date<br>12/03/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Beuerlein, Laura<br>.....<br>Contributor address; City; State; Zip Code<br>2605 Woodmont Avenue<br><br>Austin, TX 78703                | Amount of Contribution (\$)<br><br>\$526.63             |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                             |
| Date<br>11/06/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Beuerlein, Steve<br>.....<br>Contributor address; City; State; Zip Code<br>2605 Woodmont Ave.<br><br>Austin, TX 78703                  | Amount of Contribution (\$)<br><br>\$400.00             |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                             |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>                                  |  | <b>1</b> Total pages Schedule A1:<br>Sch: 2/8 Rpt: 5/18 |
| <b>2</b> FILER NAME<br>Littlefield, Jennifer  |  | <b>3</b> Filer ID                                       |
| <b>4</b> Date<br>11/12/2020   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Blizzard, Michael | <b>7</b> Amount of Contribution (\$) \$105.58           |
| <b>6</b> Contributor address; City; State; Zip Code<br>2100 Southern Oaks<br><br>Austin, TX 78745 |  |   |
| <b>8</b> Principal occupation / Job title (See Instructions)                                      |  | <b>9</b> Employer (See Instructions)                    |
| Date<br>10/30/2020  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Blizzard, Michael          | Amount of Contribution (\$) \$105.58                    |
| Contributor address; City; State; Zip Code<br>2100 Southern Oaks<br><br>Austin, TX 78745          |  |   |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                             |
| Date<br>10/29/2020  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bourgeois, Helen           | Amount of Contribution (\$) \$26.63                     |
| Contributor address; City; State; Zip Code<br>6525 Walebridge Lane<br><br>Austin, TX 78739        |  |   |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                             |
| Date<br>11/18/2020  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Campaign, Amber Elenz      | Amount of Contribution (\$) \$526.63                    |
| Contributor address; City; State; Zip Code<br>1900 Elton Lane<br><br>Austin, TX 78703             |  |   |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                             |
| Date<br>11/04/2020  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Campbell, Cherylann        | Amount of Contribution (\$) \$105.58                    |
| Contributor address; City; State; Zip Code<br>2603 Forest Bend Drive<br><br>Austin, TX 78704      |  |   |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                             |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b> |   | 1 Total pages Schedule A1:<br>Sch: 3/8 Rpt: 6/18 |
| 2 FILER NAME<br>Littlefield, Jennifer                            |   | 3 Filer ID                                       |
| 4 Date<br>11/05/2020   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cofer, Rick       | 7 Amount of Contribution (\$) \$263.47           |
|  | 6 Contributor address; City; State; Zip Code<br>1621 Enfield Road A<br><br>Austin, TX 78703             |  |
| 8 Principal occupation / Job title (See Instructions)            |   | 9 Employer (See Instructions)                    |
| Date<br>11/17/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cosart, Christopher | Amount of Contribution (\$) \$26.63              |
|  | Contributor address; City; State; Zip Code<br>7809 Vail Valley Dr<br><br>Austin, TX 78749               |  |
| Principal occupation / Job title (See Instructions)              |   | Employer (See Instructions)                      |
| Date<br>11/03/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cowan, Julie        | Amount of Contribution (\$) \$105.58             |
|  | Contributor address; City; State; Zip Code<br>4323 Spicewood Springs Rd<br>Unit 8<br>Austin, TX 78759   |  |
| Principal occupation / Job title (See Instructions)              |   | Employer (See Instructions)                      |
| Date<br>11/05/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Curtis, Matthew     | Amount of Contribution (\$) \$421.37             |
|  | Contributor address; City; State; Zip Code<br>4008 Berkman Dr<br><br>Austin, TX 78723                   |  |
| Principal occupation / Job title (See Instructions)              |   | Employer (See Instructions)                      |
| Date<br>11/25/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Dyess, Martha       | Amount of Contribution (\$) \$263.47             |
|  | Contributor address; City; State; Zip Code<br>3205 Bowman Avenue<br><br>Austin, TX 78703                |  |
| Principal occupation / Job title (See Instructions)              |   | Employer (See Instructions)                      |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>                                  |  | <b>1</b> Total pages Schedule A1:<br>Sch: 4/8 Rpt: 7/18 |
| <b>2</b> FILER NAME<br>Littlefield, Jennifer  |  | <b>3</b> Filer ID                                       |
| <b>4</b> Date<br>11/20/2020   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Harslem, Eric | <b>7</b> Amount of Contribution (\$) \$1,500.00         |
| <b>6</b> Contributor address; City; State; Zip Code<br>911 Old Stonehedge<br><br>Austin, TX 78746 |  |   |
| <b>8</b> Principal occupation / Job title (See Instructions)                                      |  | <b>9</b> Employer (See Instructions)                    |
| Date<br>11/05/2020  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Howard, John           | Amount of Contribution (\$) \$263.47                    |
| Contributor address; City; State; Zip Code<br>1812 West Avenue<br>No. 202<br>Austin, TX 78701     |  |   |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                             |
| Date<br>11/05/2020  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Land, Diane            | Amount of Contribution (\$) \$526.63                    |
| Contributor address; City; State; Zip Code<br>210 Lavaca St<br>Apt 2605<br>Austin, TX 78701       |  |   |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                             |
| Date<br>10/25/2020  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Legate, Elizabeth      | Amount of Contribution (\$) \$100.00                    |
| Contributor address; City; State; Zip Code<br>5025 McDade Dr<br><br>Austin, TX 78735              |  |   |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                             |
| Date<br>10/30/2020  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>M Long, Robert         | Amount of Contribution (\$) \$105.58                    |
| Contributor address; City; State; Zip Code<br>6006 Front Royal Dr<br><br>Austin, TX 78746         |  |   |
| Principal occupation / Job title (See Instructions)   |  | Employer (See Instructions)                             |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |   |
|--|--|---|
| <b>The Instruction Guide explains how to complete this form.</b> |  | <b>1</b> Total pages Schedule A1:<br>Sch: 5/8 Rpt: 8/18 |
| <b>2</b> FILER NAME<br>Littlefield, Jennifer                     |  | <b>3</b> Filer ID                                       |
| <b>4</b> Date<br>11/05/2020                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Maxey, Glen<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>5200 GUADALUPE ST<br><br>AUSTIN, TX 78751 | <b>7</b> Amount of Contribution (\$) \$263.47           |
| <b>8</b> Principal occupation / Job title (See Instructions)     |  | <b>9</b> Employer (See Instructions)                    |
| Date<br>10/29/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Miller, Arnold Bryce<br><hr/> Contributor address; City; State; Zip Code<br>2708 Stratford<br><br>Austin, TX 78746             | Amount of Contribution (\$) \$526.63                    |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                             |
| Date<br>11/06/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Miller, Bryce<br><hr/> Contributor address; City; State; Zip Code<br>500 W. 5th Street, Suite 700<br><br>Austin, TX 78701      | Amount of Contribution (\$) \$500.00                    |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                             |
| Date<br>11/17/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Moore, Gates<br><hr/> Contributor address; City; State; Zip Code<br>7706 Vail Valley Dr<br><br>Austin, TX 78749                | Amount of Contribution (\$) \$105.58                    |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                             |
| Date<br>11/04/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Moore, Gates<br><hr/> Contributor address; City; State; Zip Code<br>7706 Vail Valley Dr<br><br>Austin, TX 78749                | Amount of Contribution (\$) \$105.58                    |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                             |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b> |   | 1 Total pages Schedule A1:<br>Sch: 6/8 Rpt: 9/18 |
| 2 FILER NAME<br>Littlefield, Jennifer                            |   | 3 Filer ID                                       |
| 4 Date<br>12/03/2020   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>NEELY, MARY ANN | 7 Amount of Contribution (\$) \$52.95            |
|  | 6 Contributor address; City; State; Zip Code<br>1908 Barton Pky<br><br>Austin, TX 78704               |  |
| 8 Principal occupation / Job title (See Instructions)            |   | 9 Employer (See Instructions)                    |
| Date<br>11/05/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Nickle, Barbara   | Amount of Contribution (\$) \$210.84             |
|  | Contributor address; City; State; Zip Code<br>6420 Clairmont Dr<br><br>Austin, TX 78749               |  |
| Principal occupation / Job title (See Instructions)              |   | Employer (See Instructions)                      |
| Date<br>10/29/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Prickett, Lane    | Amount of Contribution (\$) \$105.58             |
|  | Contributor address; City; State; Zip Code<br>PO Box 5370<br><br>Austin, TX 78764                     |  |
| Principal occupation / Job title (See Instructions)              |   | Employer (See Instructions)                      |
| Date<br>11/20/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rider, Kathy      | Amount of Contribution (\$) \$250.00             |
|  | Contributor address; City; State; Zip Code<br>3221 Clearview Dr<br><br>Austin, TX 78703               |  |
| Principal occupation / Job title (See Instructions)              |   | Employer (See Instructions)                      |
| Date<br>10/26/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Tackett, Larkin   | Amount of Contribution (\$) \$400.00             |
|  | Contributor address; City; State; Zip Code<br>2017 MC BEE ST.<br><br>AUSTIN, TX 78723                 |  |
| Principal occupation / Job title (See Instructions)              |   | Employer (See Instructions)                      |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |   |
|--|--|---|
| <b>The Instruction Guide explains how to complete this form.</b> |  | 1 Total pages Schedule A1:<br>Sch: 7/8 Rpt: 10/18 |
| 2 FILER NAME<br>Littlefield, Jennifer                            |  | 3 Filer ID  |
| 4 Date<br>11/24/2020   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Van Zee, Kaitlin | 7 Amount of Contribution (\$) \$210.84            |
|  | 6 Contributor address; City; State; Zip Code<br>1307 Kinney Ave Apt 148<br><br>Austin, TX 78704        |   |
| 8 Principal occupation / Job title (See Instructions)            |  | 9 Employer (See Instructions)                     |
| Date<br>10/28/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Wagner, Yasmin     | Amount of Contribution (\$) \$789.79              |
|  | Contributor address; City; State; Zip Code<br>11213 South Bay Ln<br><br>Austin, TX 78739               |   |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                       |
| Date<br>11/17/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Williams, Mark     | Amount of Contribution (\$) \$500.00              |
|  | Contributor address; City; State; Zip Code<br>2801 Scenic Dr<br><br>Austin, TX 78703                   |   |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                       |
| Date<br>11/16/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>adams, John        | Amount of Contribution (\$) \$52.95               |
|  | Contributor address; City; State; Zip Code<br>1005 Oak Meadow Dr<br><br>DRIPPING SPRINGS, TX 78620     |   |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                       |
| Date<br>11/06/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>cofer, george      | Amount of Contribution (\$) \$37.16               |
|  | Contributor address; City; State; Zip Code<br>3306 gentry drive<br><br>austin, TX 78746                |   |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                       |

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b> |  | <b>1</b> Total pages Schedule A1:<br>Sch: 8/8 Rpt: 11/18 |
| <b>2</b> FILER NAME<br>Littlefield, Jennifer                     |  | <b>3</b> Filer ID  |
| <b>4</b> Date<br>11/20/2020                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>hausmann, michele<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>5612 parade ridge<br><br>austin, TX 78731 | <b>7</b> Amount of Contribution (\$)<br><br>\$105.58     |
| <b>8</b> Principal occupation / Job title (See Instructions)     |  | <b>9</b> Employer (See Instructions)                     |
| Date<br>11/30/2020   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>suttle, alison and richard<br><hr/> Contributor address; City; State; Zip Code<br>100 Congress<br><br>austin, TX 78701               | Amount of Contribution (\$)<br><br>\$526.63              |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                              |

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:  
Sch: 1/1 Rpt: 12/18

2 FILER NAME  
Littlefield, Jennifer

3 Filer ID  
mykle@y-strategy.com

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor  out-of-state PAC (ID#: \_\_\_\_\_)

8 Amount of  
pledge (\$)

9 In-kind description  
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

# LOANS

## SCHEDULE E

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>                          |  | <b>1</b> Total pages Schedule E:<br>Sch: 1/1 Rpt: 13/18   |
| <b>2</b> FILER NAME<br>Littlefield, Jennifer  |  | <b>3</b> Filer ID   |
| <b>4</b> TOTAL OF UNITEMIZED LOANS  |  | <b>\$</b>   |
| <b>5</b> Date of loan<br>10/28/2020   | <b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Jennifer , Littlefield | <b>9</b> Loan Amount (\$)<br>\$5,000.00   |
| <b>6</b> Is lender a financial institution?<br>No   | <b>8</b> Lender address; City; State; Zip Code<br>5820 Harper Park Dr<br>#49<br>Austin, TX 78749         | <b>10</b> Interest Rate<br>0  |
|   |  | <b>11</b> Maturity Date<br>12/15/2020   |
| <b>12</b> Principal occupation / Job title (See Instructions)<br>Attorney                 |  | <b>13</b> Employer (See Instructions)<br>Haynes and Boone LLP   |
| <b>14</b> Description of Collateral<br><input checked="" type="checkbox"/> None           |  | <b>15</b> Check if personal funds were deposited into political account (See Instructions)<br><input checked="" type="checkbox"/> |
| <b>16</b> GUARANTOR INFORMATION<br><br><input checked="" type="checkbox"/> not applicable | <b>17</b> Name of guarantor  | <b>19</b> Amount Guaranteed (\$)  |
|   | <b>18</b> Guarantor address; City; State; Zip Code   |   |
| <b>20</b> Principal occupation  |  | <b>21</b> Employer (See Instructions)   |

# 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  
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.

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| <b>1</b> Total pages Schedule F1:<br>Sch: 1/2 Rpt: 14/18     | <b>2</b> FILER NAME<br>Littlefield, Jennifer   | <b>3</b> Filer ID  |
| <b>4</b> Date<br>12/05/2020                                  | <b>5</b> Payee name<br>DonateWay   |  |
| <b>6</b> Amount (\$)<br>\$296.42                             | <b>7</b> Payee address; City; State; Zip Code<br>P.O. Box 301267<br><br>Austin, TX 78703       |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Credit Card Fees |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>11/30/2020   | Payee name<br>Frost Bank   |  |
| Amount (\$)<br>\$9.00  | Payee address; City; State; Zip Code<br>4301 William Cannon Blvd<br><br>Austin, TX 78749       |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fees        |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>12/05/2020   | Payee name<br>Y Strategy   |  |
| Amount (\$)<br>\$5,043.90                                    | Payee address; City; State; Zip Code<br>3110 Manor Rd<br>Suite H<br>Austin, TX 78723           |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Direct Mail      |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |

# 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  
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.

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| <b>1</b> Total pages Schedule F1:<br>Sch: 2/2 Rpt: 15/18            | <b>2</b> FILER NAME<br>Littlefield, Jennifer   | <b>3</b> Filer ID  |
| <b>4</b> Date<br>12/05/2020   | <b>5</b> Payee name<br>Y Strategy  |  |
| <b>6</b> Amount (\$)<br>\$2,549.49                                  | <b>7</b> Payee address; City; State; Zip Code<br>3110 Manor Rd<br>Suite H<br>Austin, TX 78723  |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Phonebanking |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought      Office held   |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### 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.

|  |  |  |
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| <b>1</b> Total pages Schedule G:<br>Sch: 1/3 Rpt: 16/18  | <b>2</b> FILER NAME<br>Littlefield, Jennifer   | <b>3</b> Filer ID  |
| <b>4</b> Date<br>12/04/2020  | <b>5</b> Payee name<br>Office Depot  |  |
| <b>6</b> Amount (\$)<br>\$175.08<br><br><input type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br>5300 MOPAC Expry<br>#1010<br>Austin, TX 78749                               |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense                               | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Mail Supplies |
|  | <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held |  |
| Date<br>11/30/2020   | Payee name<br>Office Depot   |  |
| Amount (\$)<br>\$175.08<br><br><input type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>5300 MOPAC Expry<br>#1010<br>Austin, TX 78749  |  |
| <b>PURPOSE OF EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br>Advertising Expense  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Mail Supplies            |
|  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held          |  |
| Date<br>11/23/2020   | Payee name<br>Office Depot   |  |
| Amount (\$)<br>\$177.13<br><br><input type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>5300 MOPAC Expry<br>#1010<br>Austin, TX 78749  |  |
| <b>PURPOSE OF EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br>Advertising Expense  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Mail Supplies            |
|  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held          |  |



# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

### 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.

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| <b>1</b> Total pages Schedule G:<br>Sch: 2/3 Rpt: 17/18  | <b>2</b> FILER NAME<br>Littlefield, Jennifer   | <b>3</b> Filer ID  |
| <b>4</b> Date<br>11/20/2020  | <b>5</b> Payee name<br>Office Depot  |  |
| <b>6</b> Amount (\$)<br>\$176.72<br><br><input type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br>5300 MOPAC Expry<br>#1010<br>Austin, TX 78749                               |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense                               | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Mail Supplies |
|  | <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held |  |
| Date<br>11/20/2020   | Payee name<br>Office Depot   |  |
| Amount (\$)<br>\$28.12<br><br><input type="checkbox"/> Reimbursement from political contributions intended           | Payee address; City; State; Zip Code<br>5300 MOPAC Expry<br>#1010<br>Austin, TX 78749  |  |
| <b>PURPOSE OF EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br>Advertising Expense  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Mail Supplies            |
|  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held          |  |
| Date<br>11/16/2020   | Payee name<br>Office Depot   |  |
| Amount (\$)<br>\$131.57<br><br><input type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>5300 MOPAC Expry<br>#1010<br>Austin, TX 78749  |  |
| <b>PURPOSE OF EXPENDITURE</b>  | Category (See Categories listed at the top of this schedule)<br>Advertising Expense  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Mail Supplies            |
|  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held          |  |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### 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.

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| <b>1</b> Total pages Schedule G:<br>Sch: 3/3 Rpt: 18/18  | <b>2</b> FILER NAME<br>Littlefield, Jennifer   | <b>3</b> Filer ID  |
| <b>4</b> Date<br>11/30/2020  | <b>5</b> Payee name<br>USPS  |  |
| <b>6</b> Amount (\$)<br>\$210.00<br><br><input type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br>6104 Old Fredricksburg Rd<br>Austin<br>TX, TX 78749 |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense       | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Mail Supplies |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought      Office held   |
| Date<br>11/23/2020   | Payee name<br>USPS   |  |
| Amount (\$)<br>\$765.00<br><br><input type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>6104 Old Fredricksburg Rd<br>Austin<br>TX, TX 78749          |  |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Advertising Expense                  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Mail Supplies            |
| Complete ONLY if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought      Office held   |
| Date<br>11/20/2020   | Payee name<br>USPS   |  |
| Amount (\$)<br>\$525.00<br><br><input type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>6104 Old Fredricksburg Rd<br>Austin<br>TX, TX 78749          |  |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Advertising Expense                  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Mail Supplies            |
| Complete ONLY if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought      Office held   |