

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: 16
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Diane	MI
	NICKNAME	LAST Hern	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	607 Beardsley Lane Austin TX 78746		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(512)	964-8535	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Jean	MI
	NICKNAME	LAST Kim	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STATE; ZIP CODE
	1906 Apricot Glen Drive Austin TX 78746		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(737)	336-1811	
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month	Day	Year
	01	18	2023
	THROUGH		Month Day Year
			03 / 27 / 2023
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	<input checked="" type="checkbox"/> Other Description <u>Local Eanes School Board Trustee</u>
	05 / 06 / 2023		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
		Eanes School Board Trustee Place 3	
14 NOTICE FROM POLITICAL COMMITTEE(S) <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. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

OFFICE USE ONLY

Date Received

23 APR 6 PM 1 23

Date Hand-delivered or Date Postmarked

Receipt #	Amount \$

Date Processed

Date Imaged

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Diane Hern		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)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,550.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 111.91
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,886.20
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,551.89
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

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

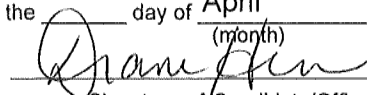
(2) Unsworn Declaration

My name is Diane Hern, and my date of birth is 09/18/1971.

My address is 607 Beardsley Lane, Austin, TX, 78746, USA.

(street) (city) (state) (zip code) (country)

Executed in Travis County, State of Texas, on the _____ day of April, 2023.



Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Diane Hern		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$6,550.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$4,774.29
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> 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: 11
2 FILER NAME Diane Hern		3 Filer ID (Ethics Commission Filers)
4 Date 01/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carol Thomson	7 Amount of contribution (\$) 100
	6 Contributor address; City; State; Zip Code PO Box 162825 Austin TX 78716	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liz Seade	Amount of contribution (\$) 250
	Contributor address; City; State; Zip Code 4601 Dusik Lane Austin TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debbi Pacitti	Amount of contribution (\$) 100
	Contributor address; City; State; Zip Code 70 Pascal Lane Austin TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robin Hendrix	Amount of contribution (\$) 100
	Contributor address; City; State; Zip Code 3987 Westlake Drive Austin TX 78746	
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11
2 FILER NAME Diane Hern		3 Filer ID (Ethics Commission Filers)
4 Date 02/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kari Riedel	7 Amount of contribution (\$) 250
	6 Contributor address; City; State; Zip Code 3416 Tarlton Lane Austin TX 78746	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valerie Andruss	Amount of contribution (\$) 100
	Contributor address; City; State; Zip Code 2002 Key West Cove Austin TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lezlie Jackson	Amount of contribution (\$) 250
	Contributor address; City; State; Zip Code 1303 Bowie Road Austin TX 78733	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paula Lear	Amount of contribution (\$) 100
	Contributor address; City; State; Zip Code 711 Knollwood Drive Austin TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Diane Hern		3 Filer ID (Ethics Commission Filers)
4 Date 02/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizabeth Walker <hr/> 6 Contributor address; City; State; Zip Code 1307 Shannon Oaks Trail Austin TX 78746	7 Amount of contribution (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LuAnn Bundrant <hr/> Contributor address; City; State; Zip Code 1805 Randolph Ridge Trail Austin TX 78746	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kristin McDuffee <hr/> Contributor address; City; State; Zip Code 1506 Patterson Road Austin TX 78733	Amount of contribution (\$) 500
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly Hall <hr/> Contributor address; City; State; Zip Code 6505 Lost Cove Austin TX 78746	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Diane Hern		3 Filer ID (Ethics Commission Filers)
4 Date 02/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vivian Min 6 Contributor address; City; State; Zip Code 6301 Indian Canyon Drive Austin TX 78746	7 Amount of contribution (\$) 250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Min Tung Contributor address; City; State; Zip Code 701 Beardsley Lane Austin TX 78746	Amount of contribution (\$) 250
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valerie Acevedo Contributor address; City; State; Zip Code 1509 Camp Craft Rd, Unit B Austin TX 78746	Amount of contribution (\$) 50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susie Thornhill Contributor address; City; State; Zip Code 1926 Cypress Point West Austin TX 78746	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Diane Hern		3 Filer ID (Ethics Commission Filers)
4 Date 03/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eleanor Kim-Moon <hr/> 6 Contributor address; City; State; Zip Code 3542 Fruitvale Avenue Oakland CA 94602	7 Amount of contribution (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julia Webber <hr/> Contributor address; City; State; Zip Code 15 Sugar Shack Drive Austin TX 78746	Amount of contribution (\$) 150
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heather Howell <hr/> Contributor address; City; State; Zip Code 1700 Lemon Mint Court Austin TX 78733	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 30/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathy Chesner <hr/> Contributor address; City; State; Zip Code 1701 Randolph Ridge Trail Austin TX 78746	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11
2 FILER NAME Diane Hern		3 Filer ID (Ethics Commission Filers)
4 Date 03/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizabeth Masse Hooks 6 Contributor address; City; State; Zip Code 6401 Royal Birkdale Overlook Austin TX 78746	7 Amount of contribution (\$) 25
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbara Best Contributor address; City; State; Zip Code 4283 Ponce Drive Palo Alto CA 94306	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coralie Pledger Contributor address; City; State; Zip Code 1007 Madrone Road Austin TX 78746	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cathy Bachl Contributor address; City; State; Zip Code 1303 Wilson Heights Drive Austin TX 78746	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Diane Hern		3 Filer ID (Ethics Commission Filers)
4 Date 03/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margie Brindley 6 Contributor address; City; State; Zip Code 614 Beardsley Lane Austin TX 78746	7 Amount of contribution (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leah Stewart Contributor address; City; State; Zip Code 6108 Turtle Point Drive Austin TX 78746	Amount of contribution (\$) 50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrie Wilkin Contributor address; City; State; Zip Code 832 Stonewall Ridge Lane Austin TX 78746	Amount of contribution (\$) 50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sara Van Slyke Contributor address; City; State; Zip Code 8005 Danforth Cove Austin TX 78746	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11
2 FILER NAME Diane Hern		3 Filer ID (Ethics Commission Filers)
4 Date 03/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tracey Lazorik <hr/> 6 Contributor address; City; State; Zip Code 535 Beardsley Lane Austin TX 78746	7 Amount of contribution (\$) 250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leyla Yatim <hr/> Contributor address; City; State; Zip Code 6669 Whitemarsh Valley Walk Austin TX 78746	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melissa Howitt <hr/> Contributor address; City; State; Zip Code 5506 Bay Hill Cove Austin TX 78746	Amount of contribution (\$) 25
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Annabelle Perdido <hr/> Contributor address; City; State; Zip Code 700 Knollwood Drive Austin TX 78746	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Diane Hern		3 Filer ID (Ethics Commission Filers)
4 Date 03/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mindy Vescovo	7 Amount of contribution (\$) 250
6 Contributor address; City; State; Zip Code 604 Rocky River Road Austin TX 78746		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randy Lee	Amount of contribution (\$) 250
Contributor address; City; State; Zip Code PO Box 1806 Austin TX 78767		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynne Dobson	Amount of contribution (\$) 1000
Contributor address; City; State; Zip Code 501 Rocky River Road Austin TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff Simpler	Amount of contribution (\$) 250
Contributor address; City; State; Zip Code 1408 Patterson Road Austin TX 78733		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11
2 FILER NAME Diane Hern		3 Filer ID (Ethics Commission Filers)
4 Date 03/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deborah Novelli	7 Amount of contribution (\$) 100
6 Contributor address; City; State; Zip Code 4501 Westlake Drive, 17 Austin TX 78746		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andy Bitner	Amount of contribution (\$) 50
Contributor address; City; State; Zip Code 6525 Whitmarsh Valley Walk Austin TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Champagne	Amount of contribution (\$) 200
Contributor address; City; State; Zip Code 6410 Five Acre Wood Austin TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erin Cowden	Amount of contribution (\$) 50
Contributor address; City; State; Zip Code 3126 Eanes Circle Austin TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Diane Hern		3 Filer ID (Ethics Commission Filers)
4 Date 02/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danielle de Zorzi <hr/> 6 Contributor address; City; State; Zip Code 501 Furlong Drive Austin TX 78746	7 Amount of contribution (\$) 50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shari Mitchell <hr/> Contributor address; City; State; Zip Code 1400 Quaker Ridge Drive Austin TX 78746	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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: 2	2 FILER NAME Diane Hern	3 Filer ID (Ethics Commission Filers)
4 Date 03/27/2023	5 Payee name Anedot Inc.	
6 Amount (\$) 257.40	7 Payee address; 1340 Poydras Street, Suite 1770	City; State; Zip Code New Orleans LA 70112
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Payment processing fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 03/17/2023	Payee name Super Cheap Signs		
Amount (\$) 1425.11	Payee address; 9200 Waterford Centre Blvd #100	City; State; Zip Code Austin TX 78758	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing	Description Yard signs	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 03/27/2023	Payee name Super Cheap Signs		
Amount (\$) 373.59	Payee address; 9200 Waterford Centre Blvd #100	City; State; Zip Code Austin TX 78758	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing	Description Yard signs	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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	

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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: 2	2 FILER NAME Diane Hern	3 Filer ID (Ethics Commission Filers)
4 Date 03/27/2023	5 Payee name HD Campaigns	
6 Amount (\$) 1987.50	7 Payee address; City; State; Zip Code 4711 Spicewood Springs Road #227 Austin TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting	(b) Description Campaign management consulting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 03/13/2023	Payee name Austin Texas Print	
Amount (\$) 730.69	Payee address; City; State; Zip Code 6448 E. Highway 290 C102 Austin TX 78723	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing	Description Pushcard printing
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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