

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

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

2 of 12

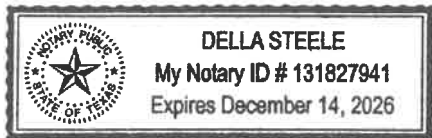
13 C / OH NAME Cousins, Kim	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <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.	
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	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)	\$	3,449.69
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	2,758.77
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	2,741.97
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

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.



Kim Cousins

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kim Cousins, this the 5th day of April, 2023, to certify which, witness my hand and seal of office.

Della Steele

Signature of officer administering

Della Steele

Printed name of officer administering

TEXAS NOTARY PUBLIC

Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Cousins, Kim		19 Filer ID	
20 SCHEDULE SUBTOTALS			SUBTOTAL AMOUNT
NAME OF SCHEDULE			
1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,338.19
2.	<input checked="" type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 111.50
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 442.68
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 2,316.09
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/12
2 FILER NAME Cousins, Kim		3 Filer ID
4 Date 03/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, John	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code 1005 Oak Meadow Dr Dripping Springs, TX 78620	
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Dripping Springs ISD
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Jamie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 1827 Spillman St Austin, TX 78704	
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 04/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan-Farris, Trinda	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 13229 Madrone Mountain Way Austin, TX 78737	
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 04/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Susan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 395 Steamboat Crossing Dripping Springs, TX 78620	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Cornell Smith Mierl Brutocao Burton
Date 03/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Chrissy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 230 Big Meadow Rd Austin, TX 78737	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Woombikes

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/12
2 FILER NAME Cousins, Kim		3 Filer ID
4 Date 03/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Tracey	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 249 Canterbury Dr Austin, TX 78737		
8 Principal occupation / Job title (See Instructions) Recruiting		9 Employer (See Instructions) George P Johnson Experience Marketing
Date 03/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corado, Lis	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1927 Ramada Dr Houston, TX 77062		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Clear Creek ISD
Date 03/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cousins, Mark	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 139 Rain Lily Circle Austin, TX 78737		
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) UIL
Date 03/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Day, Joanna	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 10 Carraige House Lane Austin, TX 78737		
Principal occupation / Job title (See Instructions) Stay at home parent		Employer (See Instructions) Self
Date 03/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falkenburg, Norman	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 803 Colony Glen Ct Houston, TX 77062		
Principal occupation / Job title (See Instructions) Representative		Employer (See Instructions) Blackstone Medical

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 3/5 Rpt: 6/12

2 FILER NAME
Cousins, Kim

3 Filer ID

4 Date
03/25/2023

5 Full name of contributor out-of-state PAC (ID#: _____)
Fortenberry, Thaddeus

7 Amount of Contribution (\$)

\$653.19

6 Contributor address; City; State; Zip Code
115 North Canyonwood Dr
Dripping Springs, TX 78620

8 Principal occupation / Job title (See Instructions)
Engineer

9 Employer (See Instructions)
Tenstorrent

Date
03/31/2023

Full name of contributor out-of-state PAC (ID#: _____)
Garner, Michael

Amount of Contribution (\$)

\$1,000.00

Contributor address; City; State; Zip Code
420 Premier Park Loop
Dripping Springs, TX 78620

Principal occupation / Job title (See Instructions)
Owner

Employer (See Instructions)
Tweek Geek

Date
03/06/2023

Full name of contributor out-of-state PAC (ID#: _____)
Newton, Monica

Amount of Contribution (\$)

\$25.00

Contributor address; City; State; Zip Code
288 Dry Creek Rd
Austin, TX 78737

Principal occupation / Job title (See Instructions)
Educator

Employer (See Instructions)
Dripping Springs ISD

Date
03/06/2023

Full name of contributor out-of-state PAC (ID#: _____)
Norton, Michael

Amount of Contribution (\$)

\$50.00

Contributor address; City; State; Zip Code
1231 Cedar Pass Road
Driftwood, TX 78619

Principal occupation / Job title (See Instructions)
Educator

Employer (See Instructions)
Johnson City ISD

Date
04/03/2023

Full name of contributor out-of-state PAC (ID#: _____)
Parrish, Linda

Amount of Contribution (\$)

\$50.00

Contributor address; City; State; Zip Code
631 Sad Willow
Driftwood, TX 78619

Principal occupation / Job title (See Instructions)
Professor Emerita

Employer (See Instructions)
Texas A&M University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 4/5 Rpt: 7/12

2 FILER NAME
Cousins, Kim

3 Filer ID

4 Date
03/31/2023

5 Full name of contributor out-of-state PAC (ID#: _____)
Payne, Laura

7 Amount of Contribution (\$) **\$10.00**

6 Contributor address; City; State; Zip Code
709 West Creek Dr

Dripping Springs, TX 78620

8 Principal occupation / Job title (See Instructions)
Retired

9 Employer (See Instructions)
N/A

Date
03/22/2023

Full name of contributor out-of-state PAC (ID#: _____)
Purdy, Terri

Amount of Contribution (\$) **\$50.00**

Contributor address; City; State; Zip Code
392 Emma Loop

Austin, TX 78737

Principal occupation / Job title (See Instructions)
None

Employer (See Instructions)
None

Date
03/09/2023

Full name of contributor out-of-state PAC (ID#: _____)
Reeves, Shelly

Amount of Contribution (\$) **\$100.00**

Contributor address; City; State; Zip Code
197 Southern Drive

Johnson City, TX 78636

Principal occupation / Job title (See Instructions)
Operations Manager

Employer (See Instructions)
King Law Group

Date
03/26/2023

Full name of contributor out-of-state PAC (ID#: _____)
Schwalbe, Cortney

Amount of Contribution (\$) **\$100.00**

Contributor address; City; State; Zip Code
690 Harris Dr

Austin, TX 78737

Principal occupation / Job title (See Instructions)
Talent Acquisition Consultant

Employer (See Instructions)
Self

Date
03/09/2023

Full name of contributor out-of-state PAC (ID#: _____)
Standefer, Joy

Amount of Contribution (\$) **\$100.00**

Contributor address; City; State; Zip Code
167 Capstone Ct

Dripping Springs, TX 78620

Principal occupation / Job title (See Instructions)
SAHM

Employer (See Instructions)
Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 5/5 Rpt: 8/12

2 FILER NAME
Cousins, Kim

3 Filer ID

4 Date
04/03/2023

5 Full name of contributor out-of-state PAC (ID#: _____)
Warder, Melissa

7 Amount of Contribution (\$)

\$50.00

6 Contributor address; City; State; Zip Code
130 Granite Ln

Austin, TX 78737

8 Principal occupation / Job title (See Instructions)
Account Manager

9 Employer (See Instructions)
IDeaS

Date
03/17/2023

Full name of contributor out-of-state PAC (ID#: _____)
Weber, Kelly

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code
710 A Johanna St

Austin, TX 78704

Principal occupation / Job title (See Instructions)
Retired RN

Employer (See Instructions)
None

Date
04/05/2023

Full name of contributor out-of-state PAC (ID#: _____)
Willis, Kent

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code
829 Tom Sawyer Road

Dripping Springs, TX 78620

Principal occupation / Job title (See Instructions)
Vice President

Employer (See Instructions)
TrachMar

Date
03/06/2023

Full name of contributor out-of-state PAC (ID#: _____)
Zachrison, Kendra

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code
259 Magnolia Blossom Cove

Driftwood, TX 78619

Principal occupation / Job title (See Instructions)
RN

Employer (See Instructions)
St. Davids NAMC

Date
03/08/2023

Full name of contributor out-of-state PAC (ID#: _____)
de Cardenas, Carol

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code
8117 Bellancia Dr

Austin, TX 78738

Principal occupation / Job title (See Instructions)
Executive Director

Employer (See Instructions)
ASPVA

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 9/12
2 FILER NAME Cousins, Kim		3 Filer ID
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
5 Date 03/22/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Kathi 7 Contributor address; City; State; Zip Code 13524 Evergreen Way Austin, TX 78737	8 Amount of contribution (\$) 9 In-kind contribution description \$111.50 stickers <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Floral Event Designer and Planner	11 Employer (FOR NON-JUDICIAL) (See instructions) Kathi Thomas Design	
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/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: Sch: 1/1 Rpt: 10/12	2 FILER NAME Cousins, Kim	3 Filer ID
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4 Date 03/27/2023	5 Payee name Campaign Partners
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6 Amount (\$) \$32.00	7 Payee address; City; State; Zip Code PO Box 118 Still River, MA 01467
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) web hosting	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense web site provider
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/28/2023	Payee name Cousins, Kim
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Amount (\$) \$314.68	Payee address; City; State; Zip Code 139 Rain Lily Circle Austin, TX 78737
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for political expenditures from personal funds - web services and push cards.
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/05/2023	Payee name Stripe
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Amount (\$) \$96.00	Payee address; City; State; Zip Code 354 Oyster Point Blvd HQ South San Francisco, CA 94080
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense transaction fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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.

1 Total pages Schedule G: Sch: 1/2 Rpt: 11/12	2 FILER NAME Cousins, Kim	3 Filer ID
4 Date 03/06/2023	5 Payee name Campaign Partners	
6 Amount (\$) \$32.14 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 118 Still River, MA 01467	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) web services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense web services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/03/2023	Payee name Super Cheap Signs	
Amount (\$) \$1,140.83 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 9200 Waterford Centre Blvd Suite 100 Austin, TX 78758	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/18/2023	Payee name Super Cheap Signs	
Amount (\$) \$860.58 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 9200 Waterford Centre Blvd Suite 100 Austin, TX 78758	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Road Signs
Complete ONLY 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.

1 Total pages Schedule G: Sch: 2/2 Rpt: 12/12	2 FILER NAME Cousins, Kim	3 Filer ID
4 Date 03/20/2023	5 Payee name Super Cheap Signs	
6 Amount (\$) \$282.54 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 9200 Waterford Centre Blvd Suite 100 Austin, TX 78758	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense push cards
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held