



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME

Nicholas Kaufman

16 Filer ID (Ethics Commission Filers)

09669843

17 CONTRIBUTION  
TOTALS

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

\$ 455

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

\$ 4,775

EXPENDITURE  
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$ 141.09

4. TOTAL POLITICAL EXPENDITURES

\$ 8,106.62

CONTRIBUTION  
BALANCE

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

\$ 3,188.92

OUTSTANDING  
LOAN TOTALS

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

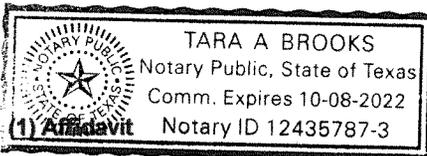
\$ 3,074.46

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.

*Nicholas Kaufman*  
Signature of Candidate or Officeholder

Please complete either option below:



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Nicholaus Kaufman this the 23rd day of April

2021, to certify which, witness my hand and seal of office.

Tara Brooks  
Signature of officer administering oath

Tara A Brooks  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_

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

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(month) (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME <i>Nicholas Kaufman</i>		20 Filer ID (Ethics Commission Filers) <i>09669843</i>
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>3,070</i>
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>1,250</i>
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	\$ <i>7,915.95</i>
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>49.58</i>
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: <span style="font-size: 2em; margin-left: 100px;">5</span>
2 FILER NAME <b>Nicholas Kaufman</b>		3 Filer ID (Ethics Commission Filers) <b>09669843</b>
4 Date <b>3/20/2021</b>	5 Full name of contributor out-of-state PAC (ID# _____) <b>Pat Noell</b> ..... 6 Contributor address; City; State; Zip Code <b>448 Caviness Dr., Grapevine, TX 76051</b>	7 Amount of contribution (\$) <b>\$25.00</b> °
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>3/25/2021</b>	Full name of contributor out-of-state PAC (ID# _____) <b>William Loots</b> ..... Contributor address; City; State; Zip Code <b>331 E. College St., Grapevine, TX 76051</b>	Amount of contribution (\$) <b>\$100</b> °
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3/26/2021</b>	Full name of contributor out-of-state PAC (ID# _____) <b>Julie Jacob</b> ..... Contributor address; City; State; Zip Code <b>503 Dove Creek Place, Grapevine, TX 76051</b>	Amount of contribution (\$) <b>\$100</b> °
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3/26/2021</b>	Full name of contributor out-of-state PAC (ID# _____) <b>Charles Larson</b> ..... Contributor address; City; State; Zip Code <b>3022 Southridge Ct., Grapevine, TX 76051</b>	Amount of contribution (\$) <b>\$100</b> °
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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: <span style="font-size: 1.5em; margin-left: 20px;">5</span>
2 FILER NAME <b>Nicholas Kaufman</b>		3 Filer ID (Ethics Commission Filers) <span style="font-size: 1.2em; margin-left: 20px;">09669843</span>
4 Date <b>3/29/2021</b>	5 Full name of contributor out-of-state PAC (ID# _____) <b>Patrick Ruddy</b> ..... 6 Contributor address; City; State; Zip Code <b>2050 Grayson Dr., Ste. 2105, Grapevine, TX 76051</b>	7 Amount of contribution (\$) <b>\$20.00</b>

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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Date <b>4/1/2021</b>	Full name of contributor out-of-state PAC (ID# _____) <b>Andrew Sanderson</b> ..... Contributor address; City; State; Zip Code <b>3506 Blueberry Ln., Grapevine, TX 76051</b>	Amount of contribution (\$) <b>\$250</b>
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Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date <b>4/3/2021</b>	Full name of contributor out-of-state PAC (ID# _____) <b>Susan McDonough</b> ..... Contributor address; City; State; Zip Code <b>342 W. Worth St., Grapevine, TX 76051</b>	Amount of contribution (\$) <b>\$400</b>
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Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date <b>4/3/2021</b>	Full name of contributor out-of-state PAC (ID# _____) <b>Jean Lok</b> ..... Contributor address; City; State; Zip Code <b>107 Starr Pl., Grapevine, TX 76051</b>	Amount of contribution (\$) <b>\$50</b>
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Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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**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: <span style="font-size: 1.5em;">5</span>
2 FILER NAME <b>Nicholas Kaufman</b>		3 Filer ID (Ethics Commission Filers) <span style="font-size: 1.2em;">09669843</span>
4 Date <b>4/5/2021</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>AJ Gillinger</b> 6 Contributor address; City; State; Zip Code <b>651 S. Main St., Grapevine, TX 76051</b>	7 Amount of contribution (\$) <b>\$200</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>4/8/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Gregg Torres</b> Contributor address; City; State; Zip Code <b>2731 Cardinal Court, Grapevine, TX 76051</b>	Amount of contribution (\$) <b>\$250</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>4/13/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mary Howe</b> Contributor address; City; State; Zip Code <b>520 Dooley Court, Grapevine, TX 76051</b>	Amount of contribution (\$) <b>\$100</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>4/17/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Harry Sherman</b> Contributor address; City; State; Zip Code <b>3500 Fairmount St., Dallas, TX 75219</b>	Amount of contribution (\$) <b>\$500</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# 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: <span style="font-size: 1.5em;">5</span>
2 FILER NAME <span style="font-size: 1.2em;">Nicholas Kaufman</span>		3 Filer ID (Ethics Commission Filers) <span style="font-size: 1.2em;">09669843</span>
4 Date <span style="font-size: 1.2em;">3/24/2021</span>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <span style="font-size: 1.2em;">Dave Custable</span>	7 Amount of contribution (\$) <span style="font-size: 1.2em;">\$ 500 .</span>
6 Contributor address; City; State; Zip Code <span style="font-size: 1.2em;">753 Port America Pl. Grapevine, TX 76051</span>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <span style="font-size: 1.2em;">3/24/2021</span>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <span style="font-size: 1.2em;">Gigi Ewbank</span>	Amount of contribution (\$) <span style="font-size: 1.2em;">\$ 100 .</span>
Contributor address; City; State; Zip Code <span style="font-size: 1.2em;">405 E. Texas St., Grapevine, TX 76051</span>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <span style="font-size: 1.2em;">3/25/2021</span>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <span style="font-size: 1.2em;">Kevin Goss</span>	Amount of contribution (\$) <span style="font-size: 1.2em;">\$ 100 .</span>
Contributor address; City; State; Zip Code <span style="font-size: 1.2em;">518 Estill, Grapevine, TX 76051</span>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <span style="font-size: 1.2em;">3/26/2021</span>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <span style="font-size: 1.2em;">Marcus L. McCrary</span>	Amount of contribution (\$) <span style="font-size: 1.2em;">\$ 200 .</span>
Contributor address; City; State; Zip Code <span style="font-size: 1.2em;">410 Turner Rd, Grapevine, TX 76051</span>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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

Nicholas Kaufman

3 Filer ID (Ethics Commission Filers)

09669843

4 Date

3/24/2021

5 Full name of contributor

Diana Albrecht

out-of-state PAC (ID# \_\_\_\_\_)

7 Amount of contribution (\$)

\$ 50

6 Contributor address;

City;

State;

Zip Code

2638 Oak Creek Dr., Grapevine, TX 76051

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/29/2021

Full name of contributor

Cindy James

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

\$ 25

Contributor address;

City;

State;

Zip Code

1573 Tiffany Forest Ln., Grapevine, TX 76051

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

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.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

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 A2: <span style="float: right;">1</span>	
2 FILER NAME <b>Nicholas Kaufman</b>		3 Filer ID (Ethics Commission Filers) <b>09669843</b>	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$1,250</b>	
5 Date <b>4/8/2021</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ryan Gamill</b> ..... 7 Contributor address; City; State; Zip Code <b>3518 Red Bird Ln., Grapevine, TX 76051</b>	8 Amount of Contribution \$ <b>\$500</b> <input type="checkbox"/>	9 In-kind contribution description <b>Food, Drinks Bounce house</b>   Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date <b>4/13/2021</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Napoli's Italian Kitchen</b> ..... Contributor address; City; State; Zip Code <b>309 S. Main St., Grapevine, TX 76051</b>	Amount of Contribution \$ <b>\$750</b> <input type="checkbox"/>	In-kind contribution description <b>Buffet</b>   Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**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	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: <b>6</b>	2 FILER NAME: <b>Nicholas Kaufman</b>	3 Filer ID (Ethics Commission Filers) <b>09669843</b>
4 Date <b>4/13/2021</b>	5 Payee name <b>Vista Print</b>	
6 Amount (\$) <b>\$137.57</b>	7 Payee address; City; State; Zip Code <b>447 Advance Blvd., Windsor, ON N8N 5G8</b>	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Pamphlets</b>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete ONLY if direct expenditure to benefit C/OH		
Date <b>3/24/2021</b>	Candidate / Officeholder name <b>Community Impact</b>	
Amount (\$) <b>\$2,811.77</b>	Payee address; City; State; Zip Code <b>7460 Warren Pkwy, Ste. 160, Frisco, TX 75034</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Paid Advertisement</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH		
Date <b>4/9/2021</b>	Candidate / Officeholder name <b>Facebook</b>	
Amount (\$) <b>\$ 400</b>	Payee address; City; State; Zip Code <b>1 Facebook Way, Menlo Park, CA 94025</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Paid Advertisement</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 10	<b>2</b> FILER NAME: Nicholas Kaufman	<b>3</b> Filer ID (Ethics Commission Filers) 09669843
<b>4</b> Date 3/26/2021	<b>5</b> Payee name Facebook	
<b>6</b> Amount (\$) \$250	<b>7</b> Payee address; City; State; Zip Code 1 Facebook Way, Menlo Park, CA 94025	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Paid Advertisement
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 4/2/2021	Candidate / Officeholder name Facebook	
Amount (\$) \$319.47	Office sought Facebook	
	Office held	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Paid Advertisement
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 4/7/2021	Candidate / Officeholder name Google	
Amount (\$) \$259.97	Office sought 1600 Amphitheatre Parkway in Mountain View, California	
	Office held	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Paid Advertisement
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 0	2 FILER NAME: <b>Nicholas Kaufman</b>	3 Filer ID (Ethics Commission Filers) <b>09669843</b>
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4 Date	5 Payee name
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6 Amount (\$)	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
4/8/2021	Grapevine AMBUCS

Amount (\$)	Payee address; City; State; Zip C
\$200	2150 W. Northwest Highway, Suite 114, Grapevine, TX 76051

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	Sign at Golf Tournament
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
4/16/2021	Impact Signs and Graphics

Amount (\$)	Payee address; City; State; Zip Code
\$2,354.44	1201 Minters Chapel Rd. #301, Grapevine, TX 76051

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	Signs and Stakes
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>6</b>	2 FILER NAME: <b>Nicholas Kaufman</b>	3 Filer ID (Ethics Commission Filers) <b>09669843</b>
4 Date <b>4/12/2021</b>	5 Payee name <b>Stellini</b>	
6 Amount (\$) <b>\$198.03</b>	7 Payee address; City; State; Zip Code <b>400 E. Dallas Rd., Grapevine, TX 76051</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	(b) Description <b>Meet &amp; Greet</b>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete ONLY if direct expenditure to benefit C/OH		
Date <b>3/23/2021</b>	Candidate / Officeholder name <b>1360</b>	
Amount (\$) <b>\$390</b>	Office sought <b>2300 Clarendon Blvd Ste 800. Arlington , VA, 22201-3382</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Fees</b>	Description <b>Data</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH		
Date <b>3/29/2021</b>	Candidate / Officeholder name <b>1360</b>	
Amount (\$) <b>\$238.96</b>	Office sought <b>2300 Clarendon Blvd Ste 800. Arlington , VA, 22201-3382</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Fees</b>	Description <b>Data</b>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name <b>Office sought</b>		

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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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6	2 FILER NAME: Nicholas Kaufman	3 Filer ID (Ethics Commission Filers) 09669843
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4 Date 4/2/2021	5 Payee name Squarespace
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6 Amount (\$) \$28.15	7 Payee address; 225 Varick Street, 12th Floor, New York, NY 10014	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Payment Processor
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/5/2021	Payee name Zoom Video Communications Inc.
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Amount (\$) \$15.92	Payee address; 55 Almaden Blvd., 6th floor, San Jose, CA 95113	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Virtual Calls
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/20/2021	Payee name Apple
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Amount (\$) \$10.81	Payee address; One Apple Park Way, Cupertino, CA 95014	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Campaign Phone
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY 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: <b>6</b>	2 FILER NAME: <b>Nicholas Kaufman</b>	3 Filer ID (Ethics Commission Filers) <b>09669843</b>
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4 Date <b>4/14/2021</b>	5 Payee name <b>Main Street Bistro &amp; Bakery</b>
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6 Amount (\$) <b>\$67.90</b>	7 Payee address; <b>316 S. Main St., Grapevine, TX 76051</b>	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	(b) Description <b>Meet &amp; Greet Event</b>
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>4/20/2021</b>	Payee name <b>LOWE'S</b>
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Amount (\$) <b>\$ 232.96</b>	Payee address; <b>3000 State Hwy 121, Euless, TX 76039</b>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

**SCHEDULE G**

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.

<b>1</b> Total pages Schedule G: 1	<b>2</b> FILER NAME Nicholas Kaufman	<b>3</b> Filer ID (Ethics Commission Filers) 09669843
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<b>4</b> Date 4/30/2021	<b>5</b> Payee name Sam's Club
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<b>6</b> Amount (\$) \$ 49.58 <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 1701 W. State Hwy. 114, Grapevine, TX 76051
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description Hot Dogs, Water, Suns
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$) \$ <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	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
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Date	Payee name
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Amount (\$) \$ <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Campaign Manager
	<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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