# **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages fil	19
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST <b>Luke</b>	MI	OFFICE	USE ONLY
NAME	NICKNAME	Amphlett	SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX 118 Arlington San Antonio	n Ct.	CITY; STATE; ZIP CODE		
Change of Address					
5 CANDIDATE/ OFFICEHOLDER PHONE	(210 )	660-6881	EXTENSION	Date Hand-delivered	or Date Postmarked Amount \$
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <b>Luke</b>	МІ	Date Processed	Amount
NAME	NICKNAME	LAST	SUFFIX		
		Amphlett		Date Imaged	
7 CAMPAIGN	STREET ADDRESS	(NO PO BOX PLEASE); APT / SI	UITE #; CITY;	STATE;	ZIP CODE
TREASURER ADDRESS	118 Arlingto	n Ct. San Antonio,	TX 78210		
(Residence or Business)					
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
THONE	(210)	660-6881			
9 REPORT TYPE	January 15	30th day before e	election Runoff	15th day at treasurer a (Officeholde	
	July 15	8th day before ele	ection Exceeded Modified Reporting Limit	Final Repo	rt (Attach C/OH - FR)
10 PERIOD	Month	Day Year	Month	Day Yea	r
COVERED	3	/ 23 / 21	THROUGH 4	/ 21 / 21	
11 ELECTION	ELECTION DA	ATE	ELECTION TYPE		
	Month Day	Year Primary	Runoff Other		
	Month Day	Year	Description		
	5 / 1 ,	21 General	Special		
12 OFFICE	OFFICE HELD (if any	)	13 OFFICE SOUGHT (if know SAISD School Bo	•	District 4
14 NOTICE FROM POLITICAL  THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTHE CANDIDATE'S OR OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SIX.				LDER'S KNOWLEDGE OR	
COMMITTEE(S)	COMMITTEE TYPE	Communications Wor	kers of America COPE		
Additional Pages	■ GENERAL	COMMITTEE ADDRESS 501 Third Street, N	N.W. Washington, DC 2	0001	
	SPECIFIC	Sara Steffens	ASURER NAME		
		COMMITTEE CAMPAIGN TRE	easurer address t, N.W. Washington,	DC 20001	
		GO ТО	PAGE 2		

Forms provided by Texas Ethics Commission

Revised 8/17/2020

# **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages fil	ed:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST Luke	MI	OFFICE	USE ONLY
NAME	NICKNAME	Amphlett	SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX 118 Arlingtor San Antonio	n Ct.	CITY; STATE; ZIP CODE		
Change of Address					
5 CANDIDATE/ OFFICEHOLDER PHONE	(210 )	PHONE NUMBER 660-6881	EXTENSION		or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$
NAME	NICKNAME	LAST	SUFFIX	Date Processed  Date Imaged	
7 CAMPAIGN	STREET ADDRESS	(NO PO BOX PLEASE); APT /	SUITE #; CITY;	STATE;	ZIP CODE
TREASURER ADDRESS	118 Arlington	n Ct. San Antonio	, TX 78210		
(Residence or Business)			,		
8 CAMPAIGN TREASURER	AREA CODE	PHONE NUMBER	EXTENSION		
PHONE	(210)	660-6881			
9 REPORT TYPE	January 15	30th day before	election Runoff	15th day af treasurer a (Officeholde	
	July 15	8th day before e	election Exceeded Modified Reporting Limit	Final Repor	t (Attach C/OH - FR)
10 PERIOD COVERED	Month	Day Year	Month	Day Year	
COVERED	3	/ 23 / 21	THROUGH 4	/ 21 / 21	
11 ELECTION	ELECTION DA	ATE	ELECTION TYPE		
	Month Day	Year Primary	/ Runoff Other Description		
	5 / 1 /	✓ 21 Genera	·		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known SAISD School Books)	•	District 4
14 NOTICE FROM POLITICAL	THE CANDIDATE / OFFIC	CEHOLDER. THESE EXPENDITUR	S ACCEPTED OR POLITICAL EXPENDITURES N ES MAY HAVE BEEN MADE WITHOUT THE CAN. UIRED TO REPORT THIS INFORMATION ONLY IF 1	DIDATE'S OR OFFICEHOL	DER'S KNOWLEDGE OR
COMMITTEE(S)	COMMITTEE TYPE	San Antonio Alliance P	AC		
Additional Pages	■ GENERAL	COMMITTEE ADDRESS 120 Adams Street, S	San Antonio, TX 78210		
	SPECIFIC	COMMITTEE CAMPAIGN TR	REASURER NAME		
		COMMITTEE CAMPAIGN TO	REASURER ADDRESS		
		120 Adams Stree	et, San Antonio, TX 78210		
GO TO PAGE 2					

# **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:				
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST Luke	MI	OFFICE USE ONLY				
NAME	NICKNAME	Amphlett	SUFFIX	Date Received				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX 118 Arlingto San Antonio	n Ct.	CITY; STATE; ZIP CODE					
Change of Address								
5 CANDIDATE/ OFFICEHOLDER PHONE	(210 )	660-6881	EXTENSION	Date Hand-delivered or Date Postmarked  Receipt # Amount \$				
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST	MI	Receipt # Amount \$  Date Processed				
NAME	NICKNAME	LAST	SUFFIX	Date Imaged				
7 CAMPAIGN	STREET ADDRESS	(NO PO BOX PLEASE); APT / S	SUITE #; CITY;	STATE; ZIP CODE	_			
TREASURER	118 Arlingto	n Ct. San Antonio,	TX 78210					
ADDRESS (Residence or Business)	T TO Annigle	ii Ot. Oaii Antonio,	17.70210					
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION					
TREASURER		(210 ) 660 6991						
PHONE	(210)	660-6881						
9 REPORT TYPE	January 15	30th day before 6	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)				
	July 15	8th day before ele	ection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)				
10 PERIOD COVERED	Month	Day Year	Month	Day Year				
COVERED	3	/ 23 / 21	THROUGH 4	/ 21 / 21				
11 ELECTION	ELECTION DA	ATE	ELECTION TYPE					
	Month Day	Year Primary	Runoff Other Description					
	5 / 1 /		Special		-			
12 OFFICE	OFFICE HELD (if any	)	13 OFFICE SOUGHT (if known SAISD School Box	ard Trustee District 4				
14 NOTICE FROM POLITICAL	THE CANDIDATE / OFFI	CEHOLDER. THESE EXPENDITURE	S MAY HAVE BEEN MADE WITHOUT THE CAND	IADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	R			
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME Texas AFT COPE						
Additional Pages	■ GENERAL	COMMITTEE ADDRESS 912 Highway 183	South, Suite 100-A					
	SPECIFIC	COMMITTEE CAMPAIGN TRE	EASURER NAME					
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS 83 South, Suite 100-A	4				
	1		PAGE 2		_			
		30 10	IAULE					

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 2

15 C/OH NAME Luke Amphlett		16 Filer ID (Ethic	s Commission Filers)
17 CONTRIBUTION TOTALS	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)	\$	8,470.33
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	1,274.88
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	T DAY \$	1,184.15
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$	» –
18 SIGNATURE I	swear, or affirm, under penalty of perjury, that the accompanying report is true	and correct and	includes all information
re	quired to be reported by me under Title 15, Election Code.		
		7	
	Signature of Car	ndidate or Office	holder
50			
	Please complete either option below		
(1) Affidavit			G G
NOTARY STAMP/SEA	ML .		
Sworn to and subscribed	before me by this the _	day o	f,
	y which, witness my hand and seal of office.	SEC N	
	,		
Signature of officer administ	ering oath Printed name of officer administering oath	Title of o	officer administering oath
	OR		
(2) Unsworn Declarat	ion		
My name is Luke Am	phlett, and my date of birth is	05/11/1983	9
My address is 118 Arl	ington Ct. San Antonio T	78210	USA
ie j	(street) (city) (s	tate) (zip code	U10 DE
Executed in Bexar	County, State of Texas, on the 23 day of April (month)	, <sub>20</sub> 21	ear)
			<b>)</b>
14 T 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Signature of Candid	ate/Officeholder	(Declarant)

### **SUBTOTALS - C/OH**

## FORM C/OH COVER SHEET PG 3

	riler NAME uke Amphlett	20 Filer ID (Ethics Co	mmiss	ion Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,295.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	6,175.33
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	1,274.88
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUI	NDS	\$	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	IONS RETURNED	\$	

### SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

ii aio roquoc	no in the control of	
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 5
2 FILER NAME Luke Amp	hlett	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:) Andrew Kirk	7 Amount of contribution (\$)
04/12/2021	6 Contributor address; City; State; Zip Code 3208 James Dr. Dallas, TX 75227	30.00
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#:)  Antonio Canales	Amount of contribution (\$)
04/13/2021	Contributor address; City; State; Zip Code 311 Carnahan San Antonio, TX 78209	40.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
04/18/2021	Contributor address; City; State; Zip Code 501 Shook Ave. San Antonio, TX 78212	100.00
Principal occup teacher	pation / Job title (See Instructions)  Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
04/14/2021	Samuel Durandand  Contributor address; City; State; Zip Code  311 Carnahan St. San Antonio, TX 78209	150.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	tions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

	near mornialism is not applicable, 20 no i morado uno pago in mo	
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME Luke Amp	hlett	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:)  Katy Bravenec	7 Amount of contribution (\$)
04/07/2021	6 Contributor address; City; State; Zip Code 501 Shook Ave.	100.00
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#:)  Riley Metcalfe	Amount of contribution (\$)
04/07/2021	Contributor address; City; State; Zip Code 311 Carnahan San Antonio, TX 78209	100.00
Principal occup	eation / Job title (See Instructions)  Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
04/09/2021	James Long  Contributor address;  City;  State;  Zip Code  2508 Tampico St. San Antono, TX 78207	15.00
Principal occup teacher	pation / Job title (See Instructions)  Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#:)  Samuel Durandand	Amount of contribution (\$)
04/10/2021	Contributor address; City; State; Zip Code  311 Carnahan St. San Antonio, TX 78209	50.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	ctions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### 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:
2 FILER NAME Luke Amp	hlett		3 Filer ID (Ethics Commission Filers)
4 Date	Full name of contributor out-of-state PAC (     Mayra Hernandez	(ID#:)	7 Amount of contribution (\$)
03/23/2021	6 Contributor address; City; 3158 Comanche Crossing San Anton	State; Zip Code io, TX 78224	50.00
8 Principal occu teacher	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC (	(ID#:)	Amount of contribution (\$)
03/27/2021	Contributor address; City; 311 Carnahan San Antonio, TX	State; Zip Code 78209	50.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (	(ID#:)	Amount of contribution (\$)
04/03/2021		State; Zip Code	50.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (	(ID#:)	Amount of contribution (\$)
04/03/2021	Contributor address; City;  11835 Petal Dr. San Antonio, TX	State; Zip Code	50.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.** 

The	Instruction Guide explains how to complete th	nis form.	1 Total pages Schedule A1:
2 FILER NAME Luke Amp	hlett		3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor out-of-state P	PAC (ID#:)	7 Amount of contribution (\$)
03/23/2021	6 Contributor address; City;	State; Zip Code	10.00
	255 W. Mayfield Blvd. San An	101110, 17 70221	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date		PAC (ID#:)	Amount of contribution (\$)
03/23/2021	Charles Munoz		$\Gamma \cap \cap \cap$
03/23/2021	Contributor address; City;	State; Zip Code	50.00
	222 Inspiration Dr. San Antoni	io, TX 78228	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state P	PAC (ID#:)	Amount of contribution (\$)
03/23/2021	Antonio Canales		F0 00
03/23/2021	Contributor address; City;	State; Zip Code	50.00
	2542 Babcock San Antonio, T	X 78229	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor out-of-state P	PAC (ID#:)	Amount of contribution (\$)
00/00/0004	Kristina Miller		<b>5</b> 0.00
03/23/2021	Contributor address; City;	State; Zip Code	50.00
	7733 Louis Pasteur San Antor	nio, TX 78229	00100
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### 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 fo	orm.	1 Total pages Schedule A1:
2 FILER NAME Luke Amph	lett		3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor out-of-state PAC (ID		7 Amount of contribution (\$)
03/24/2021	6 Contributor address; City; 501 Shook Ave. San Antonic	State; Zip Code	200.00
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (ID	rica COPF	Amount of contribution (\$)
04/12/2021		State; Zip Code	1,000.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	`	D#:)	Amount of contribution (\$)
03/23/2021	Alycia Castillo  Contributor address; City;  Austin, TX 78702	State; Zip Code	50.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of contribution (\$)
03/23/2021		State; Zip Code	100.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE A2

If the requested information is not applicable, **DO NOT include this page in the report.** 

TI	he Instruction Guide explains how to complete this form	n.	1 Total pages Sched	lule A2: 6	
2 FILER NAM	E		3 Filer ID (Ethics Co	ommission Filers)	
Luke B. A	Amphlett		,	,	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ 0.00		
<b>5</b> Date	6 Full name of contributor ☐ out-of-state PAC (ID#:  Texas AFT COPE	)	8 Amount of Contribution \$	9 In-kind contribution description	
	TCXG5711 T OOT E		533.14	paid phones	
04/16/2021	7 Contributor address; City; State;	Zip Code		, I	
	912 Highway 183 South, Suite 100-	A	Check if travel outs	 ide of Texas. Complete Schedule T.	
10 Principal occ	cupation / Job title (FOR NON-JUDICIAL)(See Instructions)	<b>11</b> Employe	er (FOR NON-JUDIC	AL)(See Instructions)	
12 Contributor's	s principal occupation (FOR JUDICIAL)	13 Contribu	butor's job title (FOR JUDICIAL) (See Instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)  15 Law firm			n of contributor's spou	ise (if any) (FOR JUDICIAL)	
<b>16</b> If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor	)	Amount of	In-kind contribution	
Bato	Texas AFT COPE		Contribution \$	description	
03/31/2021	Contributor address; City; State;	Zip Code	1,372.49	Digital ads	
	912 Highway 183 South, Suite 100-AAustin, TX 78	3741	Check if travel outs	lide of Texas. Complete Schedule T.	
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDIC	AL)(See Instructions)	
Contributor's	s principal occupation (FOR JUDICIAL)	Contribu	itor's job title (FOR JU	JDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)  Law f		Law firm	of contributor's spou	ise (if any) (FOR JUDICIAL)	
If contributo	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

### SCHEDULE A2

If the requested information is not applicable, **DO NOT include this page in the report.** 

TI	he Instruction Guide explains how to complete this form	n.	1 Total pages Sched	lule A2:
2 FILER NAM	E		3 Filer ID (Ethics Co	ommission Filers)
Luke B. A	Amphlett		(=	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ 0.00	
5 Date	e		8 Amount of Contribution \$	9 In-kind contribution description
03/26/2021	7 Contributor address; City; State;	Zip Code	9.47	campaign literature paper
	120 Adams St. San Antonio, TX 7821	10	Check if travel outs	ide of Texas. Complete Schedule T.
<b>10</b> Principal occ	cupation / Job title (FOR NON-JUDICIAL)(See Instructions)	<b>11</b> Employe	er (FOR NON-JUDICI	AL)(See Instructions)
12 Contributor's	s principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JU	JDICIAL)(See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)  15 Law file		<b>15</b> Law firm	n of contributor's spou	ise (if any) (FOR JUDICIAL)
16 If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor	)	Amount of	In-kind contribution
Date	San Antonio Alliance PAC		Contribution \$	description
03/31/2021	Contributor address; City; State;	Zip Code	4.00	phone bank expense
	120 Adams St. San Antonio, TX	78210	Check if travel outs	ide of Texas. Complete Schedule T.
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employ	er (FOR NON-JUDICI	AL)(See Instructions)
Contributor's	s principal occupation (FOR JUDICIAL)	Contrib	utor's job title (FOR JU	JDICIAL) (See Instructions)
Contributor's	s employer/law firm (FOR JUDICIAL)	Law firn	n of contributor's spou	ise (if any) (FOR JUDICIAL)
If contributo	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

### 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:		
2 FILER NAM	E		3	Filer ID (Ethics Co	ommission Filers)
Luke B. A	Amphlett				
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$	0.00	
5 Date	6 Full name of contributor  ut-of-state PAC (ID#:	)	8	Amount of	9 In-kind contribution
	San Antonio Alliance PAC			Contribution \$	description
04/01/2021	7 Contributor address; City; State;	Zip Code		1,732.54	field direction
		•			 
	120 Adams St. San Antonio, TX 7821	10	Check if travel outside of Texas. Complete Schedule		
<b>10</b> Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	<b>11</b> Employe	er (F	FOR NON-JUDICI	AL)(See Instructions)
12 Contributor's	s principal occupation (FOR JUDICIAL)	13 Contribu	butor's job title (FOR JUDICIAL) (See Instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)  15 Law fir			firm of contributor's spouse (if any) (FOR JUDICIAL)		
<b>16</b> If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor	)		Amount of	In-kind contribution
Date	San Antonio Alliance PAC			Contribution \$	description
04/04/2021		43.75 advertis			advertising
0 ./ 0 ./ _ 0	Contributor address; City; State;	Zip Code	70.70		
	120 Adams St. San Antonio, TX	78210	Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Emplo		Employe	loyer (FOR NON-JUDICIAL)(See Instructions)		
Contributor's principal occupation (FOR JUDICIAL)  Contributor's			r's job title (FOR JUDICIAL) (See Instructions)		
Contributor's employer/law firm (FOR JUDICIAL)  Law f		Law firn	Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributo	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

### 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:		
2 FILER NAME			3 Filer ID (Ethics Co	ommission Filers)	
Luke B. A	Amphlett		·		
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIB	BUTIONS	\$ 0.00		
5 Date				9 In-kind contribution description	
	San Antonio Alliance PAC		484.79	campaign	
04/08/2021	7 Contributor address; City; State;	Zip Code		literature	
	120 Adams St. San Antonio, TX 7821	10	Chock if traval outs	ide of Texas. Complete Schedule T.	
40.5				<u>'</u>	
10 Principal occ	cupation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employe	er (FOR NON-JUDICI	AL)(See Instructions)	
12 Contributor's	s principal occupation (FOR JUDICIAL)	13 Contribu	outor's job title (FOR JUDICIAL) (See Instructions)		
<b>14</b> Contributor's	s employer/law firm (FOR JUDICIAL)	15 Law firm	irm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor	)	Amount of	In-kind contribution	
Date	San Antonio Alliance PAC		Contribution \$	description	
04/14/2021	Sall Allollo Allalice FAC		10.00	election data	
04/14/2021	Contributor address; City; State;	Zip Code	10.00	ĺ	
	120 Adams St. San Antonio, TX	Check if travel outside of Texas. Complete Sche		lide of Texas. Complete Schedule T.	
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICI	AL)(See Instructions)	
Contributor's	s principal occupation (FOR JUDICIAL)	Contribu	itor's job title (FOR JU	JDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm	Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributo	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

### SCHEDULE A2

If the requested information is not applicable, **DO NOT include this page in the report.** 

TI	he Instruction Guide explains how to complete this form	n.	1 Total pages Sched	dule A2:	
2 FILER NAME			3 Filer ID (Ethics Co	ommission Filers)	
Luke B. A	Amphlett		,	,	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ 0.00		
5 Date 6 Full name of contributor			8 Amount of Contribution \$	9 In-kind contribution description	
	San Antonio Amarice FAC		23.10	phone bank	
04/15/2021	7 Contributor address; City; State;	Zip Code		i .	
	120 Adams St. San Antonio, TX 78210		Check if travel outs	 ide of Texas. Complete Schedule T.	
<b>10</b> Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	<b>11</b> Employe	er (FOR NON-JUDICI	AL)(See Instructions)	
12 Contributor's	s principal occupation (FOR JUDICIAL)	13 Contribu	butor's job title (FOR JUDICIAL) (See Instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)  15 Law fi			firm of contributor's spouse (if any) (FOR JUDICIAL)		
<b>16</b> If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor	)	Amount of	In-kind contribution	
Date	San Antonio Alliance PAC		Contribution \$	description	
04/19/2021			480.63	campaign Iiterature	
	Contributor address; City; State; 120 Adams St. San Antonio, TX	Zip Code <b>78210</b>	,		
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Emplo		Employe	oloyer (FOR NON-JUDICIAL)(See Instructions)		
Contributor's	s principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JU	JDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firn	Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributo	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

### SCHEDULE A2

If the requested information is not applicable, **DO NOT include this page in the report.** 

Th	ne Instruction Guide explains how to complete this form	n.	1 Total pages Sched	ule A2:	
2 FILER NAME			3 Filer ID (Ethics Co	ommission Filers)	
Luke B. A	mphlett		- The is (Ethics of	minission i licis)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ 0.00		
5 Date	6 Full name of contributor ☐ out-of-state PAC (ID#:	)	8 Amount of Contribution \$	9 In-kind contribution description	
	San Antonio Amance PAC		29.40	phone bank	
04/20/2021	7 Contributor address; City; State;	Zip Code			
	120 Adams St. San Antonio, TX 7821	0	Check if travel outs	ide of Texas. Complete Schedule T.	
<b>10</b> Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	<b>11</b> Employe	er (FOR NON-JUDICI	AL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)		
<b>16</b> If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor	)	Amount of	In-kind contribution	
24.0	Texas AFT COPE		Contribution \$	description Direct Mail	
04/19/2021	Contributor address; City; State;	Zip Code	1,451.75	Direct Maii	
	912 Highway 183 South, Suite 100-AAustin, TX 78741		Check if travel outside of Texas. Complete Schedule T.		
Principal occ	supation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICI	AL)(See Instructions)	
Contributor's	s principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JU	JDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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)

Oreal Card Fayment	The Instruction Guide explains how to	complete this form.			
1 Total pages Schedule F1:	2 FILER NAME Luke Amphlett		3 Filer ID (Ethic	s Commission Filers)	
4 Date 04/08/2019	5 Payee name Facebook				
6 Amount (\$)		City	Stata	Zin Codo	
250.00	7 Payee address; 1 Hacker Way, Menlo Park, CA 9402	City;	State;	Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF EXPENDITURE	advertising	digital ads			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name				
04/01/2021	ActBlue				
Amount (\$)	Payee address;	City;	State;	Zip Code	
15.23	PO Box 441146 Somerville, MA 0214	14			
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Accounting	fundraising fee	е		
	Check if travel outside of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name				
Amount (\$)	Payee address;	City;	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	ı expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED		

### POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment

**Event Expense** Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District
Travel Out Of District Other (enter a category not listed above)

	The Instruction Guide explains how to d	complete this form.				
<b>1</b> Total pages Schedule F1:	2 FILER NAME Luke Amphlett		3 Filer ID (Ethio	es Commission Filers)		
4 Date 04/06/2021	5 Payee name Awaloo Printing and Sign Shop					
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code		
529.62	1230 Duke Rd San Antonio, TX 78264					
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
PURPOSE OF EXPENDITURE	Advertising	yard signs				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder livin	g expense		
<b>9</b> Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought		Office held		
Date	Payee name					
04/17/2021	Bill Miller					
Amount (\$)	Payee address;	City;	State;	Zip Code		
21.64	910 Probandt San Antonio, TX 78204	4				
	Category (See Categories listed at the top of this schedule)	Description				
PURPOSE OF	Food/Beverage	volunteer bloc	kwalk			
EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.	Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought		Office held		
Date	Payee name					
04/19/2021	Facebook					
Amount (\$)	Payee address;	City;	State;	Zip Code		
400.00	1 Hacker Way, Menlo Park, CA 9402	5				
	Category (See Categories listed at the top of this schedule)	Description				
PURPOSE OF EXPENDITURE	advertising	digital ads				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder livin	g expense		
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought		Office held		
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED			

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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)

Oreal Card Fayment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1:	2 FILER NAME Luke Amphlett		3 Filer ID (Ethics Commission Filers)
4 Date 04/04/2021	5 Payee name Bill Miller		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
24.22	910 Probandt San Antonio, TX 78204	1	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage	volunteer block	kwalk
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought	Office held
Date	Payee name		
04/16/2021	Target		
Amount (\$) 22.46	Payee address; 3227 SE Military Dr. San Antonio, TX	City; ( 78223	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage	volunteer block	kwalk
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
04/09/2021	HEB		
Amount (\$) 11.71	Payee address; 516 S. Flores San Antonio, TX 78204	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage	volunteer block	walk
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED