

## Pre-Election Report Political Committees Form ATX.7PAC

AUSTIN CITY CLERK RECEIVED

2016 MAY 3 PM 4 26

<b>1</b> Total pages filed:	15	2 Filer Name	Caroline Joiner			·		
3 Committee Name								
COMMITTEE NA	ME	Ridesharing Worl	ks For Austin					
4		Address/ PO Box				Apartment or Suite Number		
COMMITTEE ADDRESS		P. O. Box 1347 City Austin		<u>.</u>		State TX	Zip Code 78767	
5 COMMITTEE TREA: NAME	SURER	Title Nickname	First Name Caroline	Last Name Joiner			Middle Initial Suffix	
6 COMMITTEE TREAS ADDRESS AND PHONE	SURER	Address/ PO Box 208 W. 14th Stree City Austin Phone Number (# 512	et	[	Extension, if ap	Apartment or State	Suite Number Zip Code 78756	
7 REPORTING PER	IOD	Start Date (yyyym 20160502	ויישלל)		THROUGH	End Date ( 20160502	yyyymmdd}	

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Page 1 of 15



## Pre-Election Report Political Committees Form ATX.7PAC

1 Total pages filed:	Si 2 File	r Name	avolineJoiner	·
REPORTS	X	ATX.7A - Pre-E	Election Report of Contributions	
ATTACHED Check box for each form attached	n 🛛	ATX.7F - Pre-Election Report of Expenditures		

## AFFIDAVIT

By signature below, I certify that the preceding Special Pre-Election Report filed herewith is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code, Section 2-2-29 for the reporting period indicated.

,B Signature of Affiant



1			
	Organization Name, or Contributor Last Name (if applicable)		
Contributor is an individual	Lyft, Inc		
2	Contributor Address/ PO Box	Contributor Apartment or Suite Number	
CONTRIBUTOR	548 Market St. #68514		
ADDRESS	Contributor City	Contributor State Contributor Zip Cod	e
AND	San Francisco	CA 94104	
EMPLOYER	Contributor Employer	Contributor Occupation	
3			
	Contribution Date (yyyymmdd)	(\$) Contribution Amount	
· ·	20160502	\$685.71	
DETAILS	In-Kind Contribution Description, if applicable		
	In-Kind Campaign Consulting		
3 CONTRIBUTION DETAILS	In-Kind Contribution Description, if applicable		

Add Another Contribution Page

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1 CONTRIBUTOR				
NAME	Organization Name, or Contributor Last Name (if applicable)			
Contributor is an individual	Lyft, Inc			
2	Contributor Address/ PO Box	Contributor Apartm	ent or Suite Number	
CONTRIBUTOR	548 Market St. #68514			
ADDRESS	Contributor City	Contributor State	Contributor Zip Code	
AND EMPLOYER	San Francisco	СА	94104	
EMPLOTER	Contributor Employer	Contributor Occupation		
3	Contribution Date (yyyymmdd)	(\$) Contribution Am	ount	
CONTRIBUTION	20160502	\$1,800.00		
DETAILS	In-Kind Contribution Description, if applicable	J <b>L</b>		
	In-Kind Digital Promotion			



CONTRIBUTOR				
NAME	Organization Name, or Contributor Last Name (if applicable)			
Contributor is an individual	Lyft, Inc			
	Contributor Address/ PO Box	Contributor Apartm	ent or Suite Number	
CONTRIBUTOR	548 Market St. #68514	]		
ADDRESS	Contributor City	Contributor State	Contributor Zip Code	
AND	San Francisco	CA	94104	
EMPLOYER	Contributor Employer	Contributor Occupation		
	Contribution Date (yyyymmdd)	(\$) Contribution Am	iount	
CONTRIBUTION	20160502	\$630.00		
DETAILS	In-Kind Contribution Description, if applicable	J L	····	
	In-Kind Food and Beverage	<u> </u>		



CONTRIBUTOR					
NAME	Organization Name, or Contributor Last Name (if applicable)				
Contributor is an individual	Lyft, Inc				
	Contributor Address/ PO Box	Contributor Apartm	ent or Suite Number		
CONTRIBUTOR	548 Market St. #68514				
ADDRESS	Contributor City	Contributor State Contributor Zip Code			
AND EMPLOYER	San Francisco	CA	94104		
EMPLOTER	Contributor Employer	Contributor Occupation			
	Contribution Date (yyyymmdd)	(\$) Contribution Am	ount		
CONTRIBUTION	20160502	\$2,197.24			
DETAILS	In-Kind Contribution Description, if applicable				
	In-Kind Salaries and Overhead	****			



1					
CONTRIBUTOR					
NAME	Organization Name, or Contributor Last Name (if applicable)				
Contributor is an individual	Lyft, Inc				
2	Contributor Address/ PO Box	Contributor Apartm	ent or Suite Number		
CONTRIBUTOR	548 Market St. #68514		······································		
ADDRESS	Contributor City	Contributor State	Contributor Zip Code		
AND	San Francisco	СА	94104		
EMPLOYER	Contributor Employer	Contributor Occupation			
-					
3	Contribution Date (yyyymmdd)	(\$) Contribution Am	iount		
CONTRIBUTION	20160502	\$1,544.90	· · · · · · · · · · · · · · · · · · ·		
DETAILS	In-Kind Contribution Description, if applicable				
	In-Kind Travel and Lodging				

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CONTRIBUTOR			
NAME	Organization Name, or Contributor Last Name (if applicable)		
Contributor is an individual	Uber Technologies, Inc.		
2	Contributor Address/ PO Box	Contributor Apartm	ent or Suite Number
CONTRIBUTOR	1455 Market Street	4th Floor	
ADDRESS	Contributor City	Contributor State	Contributor Zip Code
AND	San Francisco	СА	94103
EMPLOYER	Contributor Employer	Contributor Occupat	tion
· · · · · · · · · · · · · · · · · · ·			
3	Contribution Date (yyyymmdd)	(\$) Contribution Am	nount
CONTRIBUTION	20160502	\$16,784.05	
DETAILS	In-Kind Contribution Description, if applicable		
	In-Kind Campaign Consulting	· · · · · · · · · · · · · · · · · · ·	



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PAYEE							
NAME	Busines	s Name, or Payee Last Name, if applicable	ł				
Payee is an individual		ategies, LLC					
2		ddress/ PO Box					
PAYEE	321 E. V		201	Payee Apartment or Suite Number			
ADDRESS	<b>└</b> ────	Payee City			Payee Zip Code		
	Des Moi		IA	ee State	50309		
3			E E				
EXPENDITURE	Categor	y ing Expense	<b>_</b>	Expenditure	Amount		
DETAILS	<b></b>	ion (If Category is "Other")		\$146,145.00			
		Media buy			Expenditure Date (yyyymmdd) 20160502		
4 Identify each candidate or t	pallot measu	re supported or opposed by the abov					
Candidate Last Name or Ballot		Candidate First Name	Office Sou	ught	Office Held		
Supported/Opposed Support for Proposition 1		(if applicable)	(if applica	ible)	(if applicable)		
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PAYEE					
NAME	Busines	ss Name, or Payee Last Name, if applicabl	e		
Payee is an individual		Aessage and Media			
2	Payee A	Address/ PO Box	<u> </u>	Payee Apartmer	nt or Suite Number
PAYEE	730 N. I	730 N. Franklin St			
ADDRESS	Payee C	ity		Payee State	Payee Zip Code
	Chicago	· · · · · · · · · · · · · · · · · · ·		11	60554
3	Categor	у		(\$) Expenditure	
EXPENDITURE	Consulti	ing Expense		\$57,880.57	
DETAILS	Descript	tion (If Category is "Other")		Expenditure Date	] ≘ (yyyymmdd)
	Ad Prod	Ad Production			
4 Identify each candidate or ba	allot measu	re supported or opposed by the above	/e expenditure	, if applicable.	
Candidate Last Name or Ballot N Supported/Opposed	Aeasure	Candidate First Name (if applicable)	Off	ce Sought	Office Held
Support for Proposition 1				pplicable)	(if applicable)
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Itemize each expenditure made	in Sections 1-4.	For additional expenditures, click	"Add Another Expenditure Page"	below.
· · · · · · · · · · · · · · · · · · ·		i or additional experiorderes, crick	Aud Another Expenditure Page"	below.

	Payee Title	Payee First Name			
PAYEE	Travis				
NAME	Business Name, or Payee Last Name, if applicable			Payee Suffix	
Payee is an individual	Considine				
2					
PAYEE	Payee Address/ PO Box			Payee Apartme	nt or Suite Number
ADDRESS	4713 Avenue	G			
	Payee City			Payee State	Payee Zip Code
	Austin			ТХ	78751
3	Category				
EXPENDITURE	Consulting Ex			(\$) Expenditure	Amount
DETAILS				\$12,500.00	
		Category is "Other")		Expenditure Dat	e (yyyymmdd)
	Campaign Consulting			20160502	
4 Identify each candidate or ba	llot measure su	oported or opposed by the abov	e expenditur	e, if applicable.	
Candidate Last Name or Ballot M Supported/Opposed	leasure	Candidate First Name (if applicable)	Off (if a	ice Sought (pplicable)	Office Held (if applicable)
Support for Proposition 1					
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PAYEE							
NAME							
	Business Name, or Payee Last Name, if applicable Jedburghs, LLC						
Payee is an individual							
2				·	······································		
PAYEE	( <b></b>	Idress/ PO Box	Payee Apartment or Suite Number				
ADDOFEC	4871 Silv	4871 Silver Springs Drive					
ADDRESS	Payee Cit	Payee City			Payee Zip Code		
	Park City	Park City			84098		
3							
EXPENDITURE	Category	······································		(\$) Expenditure Amount			
	Consultin	g Expense		\$48,146.96			
DETAILS	Descripti	on (If Category is "Other")		Expenditure Date (yyyymmdd)			
	Campaig	Campaign Consulting			20160502		
4 Identify each candidate or b	allot measur	e supported or opposed by the above					
Candidate Last Name or Ballot		Candidate First Name					
Supported/Opposed		(if applicable)	Office Sought (if applicable)		Office Held (if applicable)		
Support for Proposition 1							
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PAYEE		· · · · · · · · · · · · · · · · · · ·				
NAME	Busine	ess Name, or Payee Last Name, if applicable	<u>.</u>			
Payee is an individual	Arena	Communications				
	Payee	Address/ PO Box		Payee Apartmen	t or Suite Number	
PAYEE	1780 S	1780 Sequoia Vista Circle			· · · · · · · · · · · · · · · · · · ·	
ADDRESS	Payee	Payee City			Payee Zip Code	
	Salt La	Salt Lake City			84104	
	Catego	iry		(\$) Expenditure Amount		
EXPENDITURE	Adverti	ising Expense		\$19,320.00		
DETAILS	Descrip	otion (If Category is "Other")		Expenditure Date (yyyymmdd)		
	Printing	g Service		20160502		
ntify each candidate or b	allot measi	ure supported or opposed by the above	e expenditur	e if applicable	h	
didate Last Name or Ballot I		Candidate First Name	· · · · ·	ice Sought	Office Held	
Supported/Opposed		(if applicable)	(if a	applicable)	(if applicable)	
ort for Proposition 1		<u> </u>				
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1					·		
PAYEE							
NAME	Business	Name, or Payee Last Name, if applicab	le				
Payee is an individual		Johnson Strategies, LLC					
2	Payee Ad	dress/ PO Box		Pavee Anartmon	t or Suite Number		
PAYEE		4612 Dusk Lane Payee City			Payee Apartment or Suite Number		
ADDRESS	Payee Cit				Payee State Payee Zip Code		
	Austin	Austin			78746		
3	Category	<u>_</u>		(\$) Expanditure			
EXPENDITURE	F	g Expense		(\$) Expenditure Amount \$13,575.00			
DETAILS	Descriptio	Description (If Category is "Other")			Expenditure Date (yyyymmdd)		
	Video Pro	Video Production Services			20160502		
4 Identify each candidate or b	allot measure	supported or opposed by the abo	ve expenditure	, if applicable.			
Candidate Last Name or Ballot N Supported/Opposed	Measure	On		ice Sought Office Held applicable) (if applicable)			
Support for Proposition 1	_		<u> </u>	<u> </u>			
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PAYEE								
NAME	Busines	s Name, or Payee Last Name, if applicat	de					
Payee is an individual	<b></b>	Frost Bank						
2	Payee A	ddress/ PO Box		Payee Apartment	t or Suite Number			
PAYEE	100 We	100 West Houston St						
ADDRESS	Payee C	Payee City			Payee Zip Code			
	San Antonio			Х	78205			
3	Category	Category			(\$) Expenditure Amount			
EXPENDITURE	Account	ing/Banking		\$50.00 Expenditure Date (yyyymmdd)				
DETAILS	Descript	ion (If Category is "Other")	<u> </u>					
	Wire Fees 201			20160502	20160502			
4 Identify each candidate or ba	allot measu	re supported or opposed by the abo	ove expenditure	e, if applicable.	1980 A.			
Candidate Last Name or Ballot N Supported/Opposed	Aeasure	Candidate First Name (if applicable)		ce Sought pplicable)	Office Held (if applicable)			
Support for Proposition 1		·····						
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