

Pre-Election Report Form ATX.7PAC

2016 MAY 4 PM 4 15

1 Total pages filed:	2 Filer Name	Caroline Joiner			
3 COMMITTEE NAME	Committee Name Ridesharing Work	-			
4 COMMITTEE ADDRESS	Address/ PO Box P. O. Box 1347 City Austin			partment or Suit ate	e Number Zip Code 78767
5 COMMITTEE TREASURER NAME		First Name Caroline Last Name Joiner	· · · · · · · · · · · · · · · · · · ·	Mi	ddle Initial Suffix
6 COMMITTEE TREASURER ADDRESS AND PHONE	Address/ PO Box 208 W. 14th Stree City Austin Phone Number (# 512	et			e Number Zip Code 78756
7 REPORTING PERIOD	Start Date (yyyym 20160502	imdd)	THROUGH	End Date (yyy 20160502	ymmdd)

Office Use Only

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Pre-Election Report Political Committees Form ATX.7PAC

1 Total pages filed:	10	2 File	r Name
8		Ø	ATX.7A - Pre-Election Report of Contributions
REPORTS ATTACHED			
Check box for eac attached	h form	×	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.

Signature of Affiant



1			
CONTRIBUTOR			
NAME	Organization Name, or Contributor Last Name (if applicable)	•	
Contributor is an individual	Lyft, inc		
2	Contributor Address/ PO Box	Contributor Apartme	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 Occupat	tion
3	Contribution Date (yyyymmdd)	(\$) Contribution Am	ount
CONTRIBUTION	20160503	\$3,430.00	
DETAILS	In-Kind Contribution Description, if applicable		
	In-Kind Digital Promotion		
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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 Apartme	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 Occupat	tion
3	Contribution Date (yyyymmdd)	(\$) Contribution Am	nount
CONTRIBUTION	20160503	\$384.51	
DETAILS	In-Kind Contribution Description, if applicable		
	In-Kind Supplies		
L			



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	CA	94104	
EMPLOYER	Contributor Employer	Contributor Occupa	tion	
3	Contribution Date (yyyymmdd)	(\$) Contribution Am	nount	
CONTRIBUTION	20160503	\$500.00		
DETAILS	In-Kind Contribution Description, if applicable			
	In-Kind Campaign Consulting			



1			
CONTRIBUTOR			
NAME	Organization Name, or Contributor Last Name (if applicable)		
Contributor is an individual	Lyft, Inc		
2	Contributor Address/ PO Box	Contributor Apartme	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 Occupat	tion
3	Contribution Date (yyyymmdd)	(\$) Contribution Am	nount
CONTRIBUTION	20160503	\$630.00	
DETAILS	In-Kind Contribution Description, if applicable		
	In-Kind Food and Beverage		



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 Occupa	tion
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3	Contribution Date (yyyymmdd)	(\$) Contribution An	nount
CONTRIBUTION	20160503	\$3,575.28	
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 Apartment 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
3	Contribution Date (yyyymmdd)	(\$) Contribution Amount
CONTRIBUTION	20160503	\$557.49
DETAILS	In-Kind Contribution Description, if applicable	
	In-Kind Travel and Lodging	·
	l	



Itemize each expenditure made in Sections 1-4. For additional expenditures, click "Add Another Expenditure Page" below.

1					
PAYEE					
NAME	Busin	ess Name, or Payee Last Name, if applicable			
Payee is an individual	Bully	Pulpit Interactive LLC			
2	Bayos	Address/ PO Box			
PAYEE		Connecticut Ave, NW		Suite 800	t or Suite Number
ADDRESS					
	Payee	ington		Payee State	Payee Zip Code
	VV dSII				20036
3	Categ	ory		(\$) Expenditure /	Amount
EXPENDITURE	Adver	tising Expense		\$250,000.00	
DETAILS	Descr	iption (If Category is "Other")		Expenditure Date	: (yyyymmdd)
	Media	a buys		20160503	
4 Identify each candidate or ball	l lot mea	sure supported or opposed by the abov	e expenditure	e, if applicable.	
Candidate Last Name or Ballot Me Supported/Opposed		Candidate First Name (if applicable)	Off	ice Sought ipplicable)	Office Held (if applicable)
Support for Proposition 1		· · · · · · · · · · · · · · · · · · ·		, ,	
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Add Another Expenditure Page



Itemize each expenditure made in Sections 1-4. For additional expenditures, click "Add Another Expenditure Page" below.

1					
PAYEE					
NAME	Busin	ess Name, or Payee Last Name, if applicable			
Payee is an individual	Frost	Bank			
2	Payee	e Address/ PO Box	· · · · · · · · · · · · · · · · · · ·	Payee Apartment	t or Suite Number
PAYEE	100 V	Vest Houston St			
ADDRESS	Payee	e City		Payee State	Payee Zip Code
	San A	ntonio		ТХ	78205
3	Categ	ory		(\$) Expenditure	Amount
EXPENDITURE	Αςςοι	inting/Banking	-	\$25.00	
DETAILS	Descr	iption (If Category is "Other")		Expenditure Date	ېر (۱۹۹۹) ۱۹۹۹ (۱۹۹۹)
	Wire	Fees		20160503	
4 Identify each candidate or bal	llot mea	sure supported or opposed by the abov	e expenditure	e, if applicable.	
Candidate Last Name or Ballot M Supported/Opposed	easure	Candidate First Name (if applicable)		ice Sought applicable)	Office Held (if applicable)
Support for Proposition 1					
·					
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Add Another Expenditure Page