

**SPECIFIC-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM SPAC
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 34
3 COMMITTEE NAME Ridesharing Works For Austin		OFFICE USE ONLY	
4 COMMITTEE ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 1347 Austin, TX 78767 <input type="checkbox"/> Change of Address		Date Received	
		2016 JUL 15 AM 9 37 RECEIVED AUSTIN CITY CLERK	
		Date Hand-delivered or Date Pgs Marked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
		Caroline	
	NICKNAME	LAST	SUFFIX
		Joiner	
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STATE; ZIP CODE
	208 W. 14th Street		Austin TX 78701
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	208 W. 14th Street		Austin TX 78701
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Exceeded \$500 Limit
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input checked="" type="checkbox"/> Dissolution (Attach PAC-DR)
		<input type="checkbox"/> Runoff	<input type="checkbox"/> 10th day after campaign treasurer termination
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	04/28/2016		07/15/2016
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE	
	05/07/2016	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
		<input type="checkbox"/> General	<input type="checkbox"/> Special
		<input checked="" type="checkbox"/> Other City of Austin Joint General & Special Election	

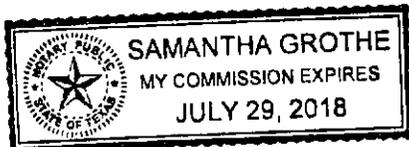
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**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM SPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Ridesharing Works For Austin		13 Filer ID 	
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate <input type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME 	
	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) 		
	<input checked="" type="checkbox"/> Measure	BALLOT IDENTIFICATION / # Prop 1	ELECTION DATE Month Day Year 05/07/2016
		DESCRIPTION Repeal and replacement of Austin City Ordinance No. 2015217	
15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	\$0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	\$3,212,400.45
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	\$0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	\$2,842,703.95
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	\$0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	\$0.00

16 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

[Handwritten Signature]

Signature of Campaign Treasurer

Sworn to and subscribed before me, by the said Caroline Joiner, this the 14th day of July, 2016, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering oath

Samantha Grothe
Printed name of officer administering oath

Notary Public
Title of officer administering oath

SUBTOTALS - SPAC

FORM SPAC
COVER SHEET PG 3
 3 of 34

17 COMMITTEE NAME Ridesharing Works For Austin	18 Filer ID
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19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 2,556,682.13
5.	<input checked="" type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 655,718.32
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 2,842,703.95
9.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
14.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/1 Rpt: 4/34
2 FILER NAME Ridesharing Works For Austin		3 Filer ID
4 Date 04/28/2016	5 Corporation / Labor Organization name Uber Technologies, Inc. <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	7 Amount of contribution (\$) \$1,000,000.00
Date 05/04/2016	Corporation / Labor Organization name Uber Technologies, Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	Amount of contribution (\$) \$500,000.00
Date 05/06/2016	Corporation / Labor Organization name Uber Technologies, Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	Amount of contribution (\$) \$500,000.00
Date 05/24/2016	Corporation / Labor Organization name Uber Technologies, Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	Amount of contribution (\$) \$556,682.13

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C2: Sch: 1/10 Rpt: 5/34	
2 FILER NAME Ridesharing Works For Austin		3 Filer ID	
4 Date 04/28/2016	5 Corporation / Labor Organization name Lyft, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	7 Amount of contribution(\$) \$660.71 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	8 In-kind contribution description In-Kind Campaign Consulting
Date 04/28/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$2,360.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Digital Promotion
Date 04/28/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$2,810.16 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Salaries and Overhead
Date 04/28/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$267.92 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Supplies
Date 04/28/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$14,569.14 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Travel and Lodging
Date 04/28/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$490.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Food and Beverage
Date 05/02/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$685.71 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Campaign Consulting

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C2: Sch: 2/10 Rpt: 6/34	
2 FILER NAME Ridesharing Works For Austin		3 Filer ID	
4 Date 05/02/2016	5 Corporation / Labor Organization name Lyft, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	7 Amount of contribution(\$) \$1,800.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	8 In-kind contribution description In-Kind Digital Promotion
Date 05/02/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$630.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Food and Beverage
Date 05/02/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$2,197.24 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Salaries and Overhead
Date 05/02/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$1,544.90 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Travel and Lodging
Date 04/29/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$660.71 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Campaign Consulting
Date 04/29/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$2,975.52 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Digital Promotion
Date 04/29/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$280.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Food and Beverage

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C2: Sch: 3/10 Rpt: 7/34	
2 FILER NAME Ridesharing Works For Austin		3 Filer ID	
4 Date 04/29/2016	5 Corporation / Labor Organization name Lyft, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	7 Amount of contribution(\$) \$1,353.75 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	8 In-kind contribution description In-Kind Salaries and Overhead
Date 04/29/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$394.47 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Campaign Supplies
Date 04/29/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$541.10 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Travel and Lodging
Date 04/30/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$660.71 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Campaign Consulting
Date 04/30/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$3,000.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Digital Promotion
Date 04/30/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$420.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Food and Beverage
Date 04/30/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$180.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Travel and Lodging

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C2: Sch: 4/10 Rpt: 8/34	
2 FILER NAME Ridesharing Works For Austin		3 Filer ID	
4 Date 05/01/2016	5 Corporation / Labor Organization name Lyft, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	7 Amount of contribution(\$) \$31,890.71 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	8 In-kind contribution description In-Kind Campaign Consulting
Date 05/01/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address: City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$1,890.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Digital Promotion
Date 05/01/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$420.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-kind food and beverage
Date 05/01/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$419.28 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Salaries and Overhead
Date 05/01/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$180.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description in-kind travel and lodging
Date 05/03/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$3,430.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Digital Promotion
Date 05/03/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$384.51 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Supplies

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule C2: Sch: 5/10 Rpt: 9/34</p>	
<p>2 FILER NAME Ridesharing Works For Austin</p>		<p>3 Filer ID</p>	
<p>4 Date 05/03/2016</p>	<p>5 Corporation / Labor Organization name Lyft, Inc.</p> <hr/> <p>6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104</p>	<p>7 Amount of contribution(\$) \$500.00</p>	<p>8 In-kind contribution description In-Kind Campaign Consulting</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Date 05/03/2016</p>	<p>Corporation / Labor Organization name Lyft, Inc.</p> <hr/> <p>Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104</p>	<p>Amount of contribution(\$) \$630.00</p>	<p>In-kind contribution description In-Kind Food and Beverage</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Date 05/03/2016</p>	<p>Corporation / Labor Organization name Lyft, Inc.</p> <hr/> <p>Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104</p>	<p>Amount of contribution(\$) \$3,575.28</p>	<p>In-kind contribution description In-Kind Salaries and Overhead</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Date 05/03/2016</p>	<p>Corporation / Labor Organization name Lyft, Inc.</p> <hr/> <p>Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104</p>	<p>Amount of contribution(\$) \$557.49</p>	<p>In-kind contribution description In-Kind Travel and Lodging</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Date 05/04/2016</p>	<p>Corporation / Labor Organization name Lyft, Inc.</p> <hr/> <p>Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104</p>	<p>Amount of contribution(\$) \$500.00</p>	<p>In-kind contribution description In-Kind Campaign Consulting</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Date 05/04/2016</p>	<p>Corporation / Labor Organization name Lyft, Inc.</p> <hr/> <p>Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104</p>	<p>Amount of contribution(\$) \$250.00</p>	<p>In-kind contribution description In-Kind Digital Promotion</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Date 05/04/2016</p>	<p>Corporation / Labor Organization name Lyft, Inc.</p> <hr/> <p>Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104</p>	<p>Amount of contribution(\$) \$700.00</p>	<p>In-kind contribution description In-Kind Food and Beverage</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C2: Sch: 6/10 Rpt: 10/34	
2 FILER NAME Ridesharing Works For Austin		3 Filer ID	
4 Date 05/04/2016	5 Corporation / Labor Organization name Lyft, Inc.	7 Amount of contribution(\$) \$4,497.76	8 In-kind contribution description In-Kind Salaries and Overhead
	6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Date 05/04/2016	Corporation / Labor Organization name Lyft, Inc.	Amount of contribution(\$) \$5,461.79	In-kind contribution description In-Kind Travel and Lodging
	Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Date 05/05/2016	Corporation / Labor Organization name Lyft, Inc.	Amount of contribution(\$) \$1,494.68	In-kind contribution description In-Kind Digital Promotion
	Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Date 05/05/2016	Corporation / Labor Organization name Lyft, Inc.	Amount of contribution(\$) \$500.00	In-kind contribution description In-Kind Campaign Consulting
	Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Date 05/05/2016	Corporation / Labor Organization name Lyft, Inc.	Amount of contribution(\$) \$1,913.67	In-kind contribution description In-Kind Food and Beverage
	Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Date 05/05/2016	Corporation / Labor Organization name Lyft, Inc.	Amount of contribution(\$) \$330.47	In-kind contribution description In-Kind Supplies
	Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Date 05/05/2016	Corporation / Labor Organization name Lyft, Inc.	Amount of contribution(\$) \$8,010.21	In-kind contribution description In-Kind Salaries and Overhead
	Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C2: Sch: 7/10 Rpt: 11/34	
2 FILER NAME Ridesharing Works For Austin		3 Filer ID	
4 Date 05/05/2016	5 Corporation / Labor Organization name Lyft, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	7 Amount of contribution(\$) \$3,567.32	8 In-kind contribution description In-Kind Travel and Lodging <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Date 05/06/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$500.00	In-kind contribution description In-Kind Campaign Consulting <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Date 05/06/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$10,930.00	In-kind contribution description In-Kind Digital Promotions <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Date 05/06/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$2,902.38	In-kind contribution description In-Kind Food and Beverage <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Date 05/06/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$9,060.18	In-kind contribution description In-Kind Salaries and Overhead <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Date 05/06/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$448.06	In-kind contribution description In-Kind Supplies <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Date 05/06/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$480.00	In-kind contribution description In-Kind Travel and Lodging <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C2: Sch: 8/10 Rpt: 12/34	
2 FILER NAME Ridesharing Works For Austin		3 Filer ID	
4 Date 06/29/2016	5 Corporation / Labor Organization name Lyft, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	7 Amount of contribution(\$) \$60,906.29 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	8 In-kind contribution description In-Kind Campaign Consulting
Date 06/29/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$13,338.76 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Food and Beverage
Date 06/29/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$12,739.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Salaries and Overhead
Date 06/29/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$2,734.75 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Supplies
Date 06/29/2016	Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	Amount of contribution(\$) \$2,725.40 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Travel and Lodging
Date 05/02/2016	Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	Amount of contribution(\$) \$16,784.05 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-kind consultant fees for campaign support
Date 06/20/2016	Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	Amount of contribution(\$) \$15,000.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-kind consultant fees for campaign support

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C2: Sch: 9/10 Rpt: 13/34	
2 FILER NAME Ridesharing Works For Austin		3 Filer ID	
4 Date 06/21/2016	5 Corporation / Labor Organization name Uber Technologies, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	7 Amount of contribution(\$) \$1,000.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	8 In-kind contribution description In-Kind Fees for Conferencing Services
Date 06/21/2016	Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	Amount of contribution(\$) \$116,773.20 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-kind consultant fees for campaign support
Date 06/21/2016	Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	Amount of contribution(\$) \$98,396.10 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-kind consultant fees for campaign support
Date 06/02/2016	Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	Amount of contribution(\$) \$57,131.42 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Retention of Temporary Labor
Date 06/23/2016	Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	Amount of contribution(\$) \$10,000.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-kind consultant fees for campaign support
Date 05/15/2016	Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	Amount of contribution(\$) \$91,711.53 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Salaries and Overhead
Date 05/15/2016	Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	Amount of contribution(\$) \$17,465.79 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Travel and Lodging

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C2: Sch: 10/10 Rpt: 14/34	
2 FILER NAME Ridesharing Works For Austin		3 Filer ID	
4 Date 05/15/2016	5 Corporation / Labor Organization name Uber Technologies, Inc.	7 Amount of contribution(\$) \$2,512.04	8 In-kind contribution description In-Kind Food and Beverage
	6 Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Date 05/15/2016	Corporation / Labor Organization name Uber Technologies, Inc.	Amount of contribution(\$) \$1,214.16	In-kind contribution description In-Kind Supplies
	Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Date 06/07/2016	Corporation / Labor Organization name Uber Technologies, Inc.	Amount of contribution(\$) \$500.00	In-kind contribution description In-kind rental of temporary office space.
	Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Date 06/16/2016	Corporation / Labor Organization name Uber Technologies, Inc.	Amount of contribution(\$) \$880.00	In-kind contribution description In-kind fees for campaign supplies
	Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 1/19 Rpt: 15/34		2 FILER NAME Ridesharing Works For Austin		3 Filer ID
4 Date 06/15/2016		5 Payee name AKPD Message & Media, LLC		
6 Amount (\$) \$17,424.58		7 Payee address; City; State; Zip Code 730 N. Franklin St. Ste 404 Chicago, IL 60654		
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 Media and ad production	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 05/05/2016		Payee name AKPD Message & Media, LLC		
Amount (\$) \$63,481.83		Payee address; City; State; Zip Code 730 N. Franklin St. Ste 404 Chicago, IL 60654		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting 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 Media and ad production	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 05/17/2016		Payee name AKPD Message & Media, LLC		
Amount (\$) \$57,880.57		Payee address; City; State; Zip Code 730 N. Franklin St. Ste 404 Chicago, IL 60654		
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 Media and ad production	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 2/19 Rpt: 16/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
4 Date 06/15/2016	5 Payee name Analytics Media Group LLC	
6 Amount (\$) \$50,000.00	7 Payee address; City; State; Zip Code 915 Broadway, Ste 1301 New York, NY 10010	
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 Surveys
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/02/2016	Payee name Arena Communications	
Amount (\$) \$19,320.00	Payee address; City; State; Zip Code 1780 Sequoia Vista Circle Salt Lake City, UT 84104	
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 Printing services
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/09/2016	Payee name Arena Communications	
Amount (\$) \$12,199.00	Payee address; City; State; Zip Code 1780 Sequoia Vista Circle Salt Lake City, UT 84104	
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 Design, printing, and layout for door hanger
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

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: 3/19 Rpt: 17/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
4 Date 05/03/2016	5 Payee name Bully Pulpit Interactive, LLC	
6 Amount (\$) \$250,000.00	7 Payee address; City; State; Zip Code 1140 Connecticut Ave. NW Suite 800 Washington, DC 20036	
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 Video display
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/02/2016	Payee name Considine, Travis	
Amount (\$) \$12,500.00	Payee address; City; State; Zip Code 4713 Avenue G Austin, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Communication consulting services
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 06/15/2016	Payee name Convergence Targeted Communications	
Amount (\$) \$19,338.18	Payee address; City; State; Zip Code 1221 Connecticut Ave NW Suite 300 Washington , DC 20036	
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 Direct mail
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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|--|-------------------------------|--------------------------------|--|
| 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: Sch: 4/19 Rpt: 18/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
4 Date 04/28/2016	5 Payee name Frost Bank	
6 Amount (\$) \$12.00	7 Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205	
8 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 Wire fees
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 04/28/2016	Payee name Frost Bank	
Amount (\$) \$12.00	Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205	
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 Wire fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 04/28/2016	Payee name Frost Bank	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205	
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 Wire fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

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: 5/19 Rpt: 19/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
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4 Date 04/28/2016	5 Payee name Frost Bank
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6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205
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8 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 Wire fees
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/28/2016	Payee name Frost Bank
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205
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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 Wire fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/29/2016	Payee name Frost Bank
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205
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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 Wire fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 6/19 Rpt: 20/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
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4 Date 05/02/2016	5 Payee name Frost Bank
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6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205
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8 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 Wire fees
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/02/2016	Payee name Frost Bank
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205
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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 Wire fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/03/2016	Payee name Frost Bank
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205
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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 Wire fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 7/19 Rpt: 21/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
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4 Date 05/04/2016	5 Payee name Frost Bank
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6 Amount (\$) \$12.00	7 Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205
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8 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 Wire fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/04/2016	Payee name Frost Bank
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205
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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 Wire fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/05/2016	Payee name Frost Bank
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205
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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 Wire fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 8/19 Rpt: 22/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
4 Date 05/06/2016	5 Payee name Frost Bank	
6 Amount (\$) \$12.00	7 Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205	
8 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 Wire fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
	Office held	
Date 05/09/2016	Payee name Frost Bank	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205	
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 Wire fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
	Office held	
Date 05/09/2016	Payee name Frost Bank	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205	
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 Wire fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
	Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 9/19 Rpt: 23/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
4 Date 05/09/2016	5 Payee name Frost Bank	
6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205	
8 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 Wire fees
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/17/2016	Payee name Frost Bank	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205	
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 Stop pay fee
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/24/2016	Payee name Frost Bank	
Amount (\$) \$12.00	Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205	
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 Wire fees
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

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: 10/19 Rpt: 24/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
4 Date 06/15/2016	5 Payee name Frost Bank	
6 Amount (\$) \$45.00	7 Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205	
8 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 Wire transfer charge
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name _____ Office sought _____ Office held _____	
Date 06/15/2016	Payee name Frost Bank	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205	
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 Wire fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name _____ Office sought _____ Office held _____	
Date 06/15/2016	Payee name Frost Bank	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205	
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 Wire fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name _____ Office sought _____ Office held _____	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 11/19 Rpt: 25/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
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4 Date 06/15/2016	5 Payee name Frost Bank
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6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205
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8 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 Wire fees
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/29/2016	Payee name Frost Bank
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205
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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 Wire fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/09/2016	Payee name Graves Dougherty Hearon & Moody
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Amount (\$) \$4,200.00	Payee address; City; State; Zip Code Post Office Box 98 Austin, TX 78767
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal 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 Attorney fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 12/19 Rpt: 26/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
4 Date 06/15/2016	5 Payee name Graves Dougherty Hearon & Moody	
6 Amount (\$) \$7,076.50	7 Payee address; City; State; Zip Code Post Office Box 98 Austin, TX 78767	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal 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 Attorney fees
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 06/15/2016	Payee name Graves Dougherty Hearon & Moody	
Amount (\$) \$9,080.50	Payee address; City; State; Zip Code Post Office Box 98 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal 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 Attorney fees
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/02/2016	Payee name Jedburghs, LLC	
Amount (\$) \$48,146.96	Payee address; City; State; Zip Code 4871 Silver Springs Drive Park City, UT 84098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign management consulting
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 13/19 Rpt: 27/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
4 Date 05/09/2016	5 Payee name Jedburghs, LLC	
6 Amount (\$) \$3,202.18	7 Payee address; City; State; Zip Code 4871 Silver Springs Drive Park City, UT 84098	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign management consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
		Office held
Date 06/15/2016	Payee name Jedburghs, LLC	
Amount (\$) \$8,000.00	Payee address; City; State; Zip Code 4871 Silver Springs Drive Park City, UT 84098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign management consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
		Office held
Date 05/05/2016	Payee name Johnson Strategies, LLC	
Amount (\$) \$37,475.00	Payee address; City; State; Zip Code 4612 Dusik Lane Austin, TX 78746	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 14/19 Rpt: 28/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
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4 Date 05/05/2016	5 Payee name Kelly Graphics
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6 Amount (\$) \$2,652.13	7 Payee address; City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Graphic design and printing
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/16/2016	Payee name Kelly Graphics
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Amount (\$) \$1,747.16	Payee address; City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746
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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 Advertising, printing, and graphic design
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/09/2016	Payee name Leffingwell, Lee
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Amount (\$) \$25,000.00	Payee address; City; State; Zip Code 4516 Balcones Dr Austin, TX 78731
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign consulting
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 15/19 Rpt: 29/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID			
4 Date 04/28/2016	5 Payee name Link Strategies, LLC				
6 Amount (\$) \$530,984.00	7 Payee address; City; State; Zip Code 321 E Walnut, Ste 201 Austin, TX 78701				
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 Media buy			
	<table border="0" style="width:100%;"> <tr> <td style="width:25%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate/Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 04/29/2016	Payee name Link Strategies, LLC				
Amount (\$) \$130,000.00	Payee address; City; State; Zip Code 321 E Walnut, Ste 201 Austin, TX 78701				
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 Media buy			
	<table border="0" style="width:100%;"> <tr> <td style="width:25%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate/Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 05/02/2016	Payee name Link Strategies, LLC				
Amount (\$) \$146,145.00	Payee address; City; State; Zip Code 321 E Walnut, Ste 201 Austin, TX 78701				
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 Media buy			
	<table border="0" style="width:100%;"> <tr> <td style="width:25%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate/Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 16/19 Rpt: 30/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
4 Date 05/04/2016	5 Payee name Link Strategies, LLC	
6 Amount (\$) \$7,430.00	7 Payee address; City; State; Zip Code 321 E Walnut, Ste 201 Austin, TX 78701	
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 Media buy
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 05/09/2016	Candidate/Officeholder name Payee name Link Strategies, LLC	
Amount (\$) \$15,916.00	Office sought Payee address; City; State; Zip Code 321 E Walnut, Ste 201 Austin, TX 78701	
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 Media buy
Complete ONLY if direct expenditure to benefit C/OH		
Date 05/05/2016	Candidate/Officeholder name Payee name M Street Insight LLC	
Amount (\$) \$10,000.00	Office sought Payee address; City; State; Zip Code 3039 M Street NW #3 Washington , DC 20007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Opposition research
Complete ONLY if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 17/19 Rpt: 31/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
4 Date 05/17/2016	5 Payee name Millan & Company, P.C.	
6 Amount (\$) \$18,966.15	7 Payee address; City; State; Zip Code 823 Congress Ave, Ste 1330 Austin, TX 78701	
8 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 Accounting fees
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/05/2016	Payee name Texas Tribune Inc.	
Amount (\$) \$24,325.00	Payee address; City; State; Zip Code 823 Congress Ave Austin, TX 78701	
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 Printing services
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/09/2016	Payee name The Strategy Group, Inc.	
Amount (\$) \$467,507.14	Payee address; City; State; Zip Code 730 N Franklin Ste# 404 Chicago, IL 60654-7205	
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 Direct mail
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 18/19 Rpt: 32/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
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4 Date 05/05/2016	5 Payee name The Strategy Group, Inc.
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6 Amount (\$) \$300,593.06	7 Payee address; City; State; Zip Code 730 N Franklin Ste# 404 Chicago, IL 60654-7205
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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 Direct mail
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/15/2016	Payee name The Strategy Group, Inc.
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Amount (\$) \$499,372.04	Payee address; City; State; Zip Code 730 N Franklin Ste# 404 Chicago, IL 60654-7205
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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 Direct mail
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/11/2016	Payee name Thompson & Knight LLP
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Amount (\$) \$6,685.46	Payee address; City; State; Zip Code PO Box 660684 Dallas, TX 75266
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal 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 Attorney fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 19/19 Rpt: 33/34	2 FILER NAME Ridesharing Works For Austin	3 Filer ID
4 Date 06/29/2016	5 Payee name Uber Technologies Inc	
6 Amount (\$) \$35,520.51	7 Payee address; City; State; Zip Code 1455 Market St 4th floor San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Refund	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refund of political contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

**POLITICAL COMMITTEE
AFFIDAVIT OF DISSOLUTION**

FORM PAC-DR

34 of 34

The Instruction Guide explains how to complete this form. ****Complete only if "Report Type" on page 1 is marked "Dissolution" ****

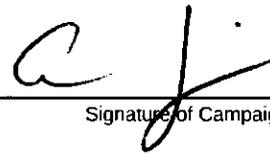
1 COMMITTEE NAME

Ridesharing Works For Austin

2 Filer ID

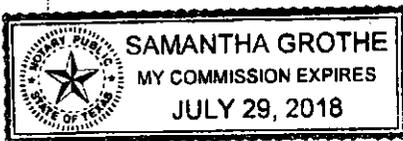
3 Affidavit of Dissolution

I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this political committee for this or any other campaign or election for which reporting under the Election Code is required. I declare that all of the information required to be reported by me has been reported. I understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a political committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file.



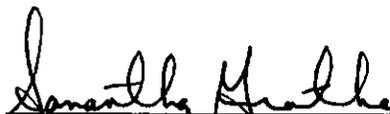
Signature of Campaign Treasurer

DO NOT SIGN UNLESS POLITICAL COMMITTEE IS TO BE DISSOLVED



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Caroline Jainer, this the 14th day of July, 20 16, to certify which, witness my hand and seal of office.


Signature of officer administering oath

Samantha Grothe
Printed name of officer administering oath

Notary Public
Title of officer administering oath