



**Report Of Direct Campaign Expenditures: Schedule ATX.1**

*(Previously Independent Expenditures not by a Candidate)*

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<p><b>1</b></p> <p><b>INDIVIDUAL OR ORGANIZATION NAME</b></p> <p><input type="checkbox"/> Filer is an individual</p>	<p>Committee or Organization Name*</p> <p>Austin Board of REALTORS PAC</p>
<p><b>2</b></p> <p><b>INDIVIDUAL OR ORGANIZATION ADDRESS</b></p>	<p>Address/ PO Box*      Apartment or Suite Number</p> <p>4800 Spicewood Springs Rd.      </p> <p>City*      State*      Zip Code*</p> <p>Austin      TX      78759</p>
<p><b>3</b></p> <p><b>COMMITTEE TREASURER NAME (if applicable)</b></p>	<p>Title      First Name      Middle Initial</p> <p>Ms.      Emily      </p> <p>Last Name      Suffix</p> <p>Chenevert      </p>
<p><b>4</b></p> <p><b>COMMITTEE TREASURER ADDRESS (if applicable)</b></p>	<p>Address/ PO Box      Apartment or Suite Number</p> <p>4800 Spicewood Springs Rd.      </p> <p>City      State      Zip Code</p> <p>Austin      TX      78759</p>
<p><b>5</b></p> <p><b>REPORT DATE</b></p>	<p>Date Filed (yyyymmdd)*</p> <p>20161026</p>

\* Indicates a required field



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## 6 AFFIDAVIT

I swear or affirm upon penalty of perjury that each direct campaign expenditure was made without prior consent, cooperation, strategic communication, consultation, or sharing of material information regarding the communication's content, intended audience, timing, or method of dissemination between an affected candidate, the candidate's campaign staff, the candidate's campaign committee, or an agent or employee of the candidate or the committee, and the person making the expenditure, or that person's agent or employee.

I further swear that this Report of Direct Campaign Expenditures 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 2-2-32.

DATE: 10/26/16

*Emily Chenevert*

AFFIANT'S SIGNATURE

Emily Chenevert

PRINT NAME

STATE OF TEXAS

COUNTY OF TRAVIS

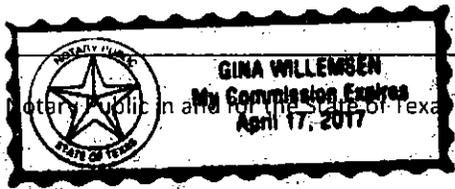
This instrument was acknowledged, sworn to and subscribed before me by

*Gina Wilkerson*

On the 26 day of October, 2016, to certify which witness my hand and official seal.

Gina Wilkerson

Typed or Printed Name of Notary





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# Expenditure

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

<b>1</b>  <b>PAYEE NAME</b>  <input type="checkbox"/> Payee is an individual	Organization Name or Payee Last Name, as applicable* <div style="border: 1px solid black; padding: 2px;">Littlefield Consulting</div>								
<b>2</b>  <b>PAYEE ADDRESS</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%; border-bottom: 1px solid black;">Payee Address/ PO Box*</td> <td style="width:40%; border-bottom: 1px solid black;">Payee Apartment or Suite Number</td> </tr> <tr> <td style="border-bottom: 1px solid black;">PO Box 90591</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Payee City*</td> <td style="border-bottom: 1px solid black;">Payee State*      Payee Zip Code*</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Austin</td> <td style="border-bottom: 1px solid black;">TX      78709</td> </tr> </table>	Payee Address/ PO Box*	Payee Apartment or Suite Number	PO Box 90591		Payee City*	Payee State*      Payee Zip Code*	Austin	TX      78709
Payee Address/ PO Box*	Payee Apartment or Suite Number								
PO Box 90591									
Payee City*	Payee State*      Payee Zip Code*								
Austin	TX      78709								
<b>3</b>  <b>EXPENDITURE DETAILS</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%; border-bottom: 1px solid black;">Category*</td> <td style="width:40%; border-bottom: 1px solid black;">(\$) Expenditure Amount*</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Consulting Expense</td> <td style="border-bottom: 1px solid black;">\$1,500.00</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Description (If Category is "Other")</td> <td style="border-bottom: 1px solid black;">Expenditure Date*</td> </tr> <tr> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;">20161026</td> </tr> </table>	Category*	(\$) Expenditure Amount*	Consulting Expense	\$1,500.00	Description (If Category is "Other")	Expenditure Date*		20161026
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Consulting Expense	\$1,500.00								
Description (If Category is "Other")	Expenditure Date*								
	20161026								

<b>4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable</b>			
Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Gallo, Support	Sheri		Council Member District 10
Casar, Support	Gregorio		Council Member District 4
Garza, Support	Delia		Council Member District 2









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# Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

Itemize each contribution in Sections 1-3. For additional contributions, click "Add Another Contribution Page" below.

<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input checked="" type="checkbox"/> Contributor is an individual	Contributor Title    Contributor First Name* <input type="text"/> <input type="text"/>  Organization Name or Contributor Last Name, as applicable*    Contributor Suffix <input type="text"/> <input type="text"/>
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	Contributor Address/ PO Box*    Contributor Apartment or Suite Number <input type="text"/> <input type="text"/> Contributor City*    Contributor State*    Contributor Zip Code* <input type="text"/> <input type="text"/> <input type="text"/> Contributor Employer*    Contributor Occupation* <input type="text"/> <input type="text"/>
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	Contribution Date (yyyymmdd)*    (\$) Contribution Amount* <input type="text"/> <input type="text"/>

[Add Another Contribution Page](#)