

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 66	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Sheri	MI	OFFICE USE ONLY  Date Received  2016 OCT 3 PM 3 22 AUSTIN CITY CLERK RECEIVED
	NICKNAME	LAST Gallo	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 26550  Austin, TX 78755		ZIP CODE	Date Hand-delivered or Date Postmarked
				Receipt #
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Lew	MI	
	NICKNAME	LAST Little	SUFFIX Jr.	
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 2806 Stratford Drive		APT / SUITE #;	CITY; Austin
			STATE; TX	ZIP CODE 78746
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	512/480-9702			
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month	Day	Year	Month
	09/30/2016		10/29/2016	
10 ELECTION	ELECTION DATE Month Day Year 11/08/2016		ELECTION TYPE	
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) Austin City Council District 10		12 OFFICE SOUGHT (if known) Austin City Council District 10	

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2  
2 of 66

13 C / OH NAME Gallo, Sheri

14 Filer ID

15 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)

☐ Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

COMMITTEE TYPE

☒ GENERAL

☐ SPECIFIC

COMMITTEE NAME

Austin Board of Realtors PAC

COMMITTEE ADDRESS

4800 Spicewood Springs Rd.

Austin, TX 78759

COMMITTEE CAMPAIGN TREASURER NAME

Chenevert, Emily

COMMITTEE CAMPAIGN TREASURER ADDRESS

4800 Spicewood Springs Rd.

Austin, TX 78759

16 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)

\$ 44,651.00

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 64,438.10

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD

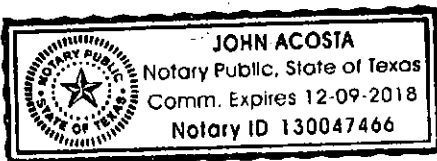
\$ 26,890.53

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0.00

17 AFFADAVIT



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.

Sheri Gallo  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sheri Gallo, this the 31<sup>st</sup> day of October, 20 16, to certify which, witness my hand and seal of office.

John Acosta  
Signature of officer administering

John Acosta  
Printed name of officer administering

Notary Public  
Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3  
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18 FILER NAME Gallo, Sheri		19 Filer ID	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	43,951.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	700.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	56,056.17
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	8,381.93
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/42 Rpt: 4/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/06/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Jon <hr/> <b>6</b> Contributor address; City; State; Zip Code 1611 Northwood Rd.  Austin, TX 78703	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>8</b> Principal occupation / Job title (See Instructions) Architect		<b>9</b> Employer (See Instructions) Self
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Valerie <hr/> Contributor address; City; State; Zip Code 212 Lavaca St. Ste. 300 Austin, TX 78701	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, William <hr/> Contributor address; City; State; Zip Code 212 Lavaca St. Ste. 300 Austin, TX 78701	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Stratus
Date 10/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Attal, Ronald Kenneth <hr/> Contributor address; City; State; Zip Code 6310 Big Cat Cove  Austin, TX 78750	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Board of Realtors PAC <hr/> Contributor address; City; State; Zip Code 4106 Medical Parkway  Austin, TX 78756	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/42 Rpt: 5/66
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 10/11/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bagby, W. Gaines 6 Contributor address; City; State; Zip Code 6501 Rusty Ridge Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Commercial Real Estate		9 Employer (See Instructions) CBRE
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Carol Contributor address; City; State; Zip Code 1418 Lance Way Austin, TX 78758	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Public Relations		Employer (See Instructions) Capitol City Insurance
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Randall Contributor address; City; State; Zip Code 1418 Lance Way Austin, TX 78758	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belofsky, Virginia Contributor address; City; State; Zip Code 4001 Greystone Dr. Austin, TX 78731	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergstrom, Alan Contributor address; City; State; Zip Code 4505 Spicewood Springs Rd. Ste. 104 Austin, TX 78759	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Special Accountant		Employer (See Instructions) Eagle Securities

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/42 Rpt: 6/66
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 10/16/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bledsoe, Bracton 6 Contributor address; City; State; Zip Code 1602 Magpie Cv. Austin, TX 78746	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bledsoe, Mary Contributor address; City; State; Zip Code 1602 Magpie Cv. Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyd, Ronald Scott Contributor address; City; State; Zip Code 3206 Riva Ridge Rd. Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Sharon McDonald Contributor address; City; State; Zip Code 6409 Mesa Dr. Austin, TX 78731	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 10/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandes, Robert Contributor address; City; State; Zip Code 312 W. Austin St. Fredericksburg, TX 78624	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/42 Rpt: 7/66
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 10/03/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brittman, Marvin 6 Contributor address; City; State; Zip Code 6110 Twin Ledge Circle Austin, TX 78731	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Requested		9 Employer (See Instructions) Requested
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, J.Tim Contributor address; City; State; Zip Code 2201 B Exposition Blvd. Austin, TX 78703	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Lynda Contributor address; City; State; Zip Code 2201 B Exposition Blvd. Austin, TX 78703	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bukowski, Sean Contributor address; City; State; Zip Code 505 W. 7th St. Apt. 216 Austin, TX 78701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bukowski Law Firm
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Erin Contributor address; City; State; Zip Code 9515 Woody Ridge Austin, TX 78730	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/42 Rpt: 8/66
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 10/06/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Kevin 6 Contributor address; City; State; Zip Code 9515 Woody Ridge Austin, TX 78730	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) McKool Smith
Date 10/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caffrey, James P. Contributor address; City; State; Zip Code 6417 Wallace Cv. Austin, TX 78750	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantwell, Cindy Contributor address; City; State; Zip Code 4215 Venado Dr. Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantwell, John Contributor address; City; State; Zip Code 4215 Venado Dr. Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carothers, David Contributor address; City; State; Zip Code 6114 Prestonsire Ln. Dallas, TX 75225	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/42 Rpt: 9/66
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 10/11/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Challener, Elisabeth 6 Contributor address; City; State; Zip Code 555 E 5th St. # 912 Austin, TX 78701	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Arts Manager		9 Employer (See Instructions) ZACH Theatre
Date 10/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, John Contributor address; City; State; Zip Code 615 W. 7th St. Apt. 1302 Austin, TX 78701	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, John Contributor address; City; State; Zip Code 615 W. 7th St. Apt. 1302 Austin, TX 78701	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Emory Contributor address; City; State; Zip Code 4105 Green Cliffs Rd. Austin, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copland, Ross W. Contributor address; City; State; Zip Code 4416 212th St. SW Apt. G3 Mountlake Terrace, WA 98043	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/42 Rpt: 10/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/22/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coronado, Dawn <hr/> <b>6</b> Contributor address; City; State; Zip Code 5602 Palisade Ct.  Austin, TX 78731	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
<b>Date</b> 10/11/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Crorey, Steve <hr/> <b>Contributor address; City; State; Zip Code</b> PO Box 27168  Austin, TX 78755	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> Broker		<b>Employer (See Instructions)</b> Sierra Homes Realty
<b>Date</b> 10/17/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley, Carol <hr/> <b>Contributor address; City; State; Zip Code</b> 5902 Lonesome Valley Trl.  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> NA
<b>Date</b> 10/17/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley, Timothy <hr/> <b>Contributor address; City; State; Zip Code</b> 5902 Lonesome Valley Trl.  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> Regional President		<b>Employer (See Instructions)</b> Frost Bank
<b>Date</b> 10/22/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Danks, Clyde <hr/> <b>Contributor address; City; State; Zip Code</b> 7901 West Rim Dr.  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/42 Rpt: 11/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/22/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danks, Kay <hr/> <b>6</b> Contributor address; City; State; Zip Code 7901 West Rim Dr.  Austin, TX 78731	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 10/21/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Driver, Susan <hr/> <b>Contributor address; City; State; Zip Code</b> 8 Woodstone Sq.  Austin, TX 78703	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/24/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Don <hr/> <b>Contributor address; City; State; Zip Code</b> 3301 Big Bend Dr.  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> CEO		<b>Employer (See Instructions)</b> PJS of Texas
<b>Date</b> 10/21/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrlich, Robert <hr/> <b>Contributor address; City; State; Zip Code</b> 1601 W. 38th St. Ste. 206 Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> Real Estate		<b>Employer (See Instructions)</b> Robert Ehrlich
<b>Date</b> 10/21/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Jim <hr/> <b>Contributor address; City; State; Zip Code</b> 4105 Medical Pkwy. Ste. 210 Austin, TX 78756	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Real Estate		<b>Employer (See Instructions)</b> Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 9/42 Rpt: 12/66

2 FILER NAME  
Gallo, Sheri

3 Filer ID

4 Date  
10/10/2016

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Ellmer, Rich

7 Amount of Contribution (\$)

\$350.00

6 Contributor address; City; State; Zip Code  
40 N IH 35  
11A2  
Austin, TX 78701

8 Principal occupation / Job title (See Instructions)  
Retired

9 Employer (See Instructions)  
NA

Date  
10/26/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Evans, Jay

Amount of Contribution (\$)

\$250.00

Contributor address; City; State; Zip Code  
139 Lone Wolf Ct.  
  
Dripping Springs, TX 78620

Principal occupation / Job title (See Instructions)  
Rancher

Employer (See Instructions)  
Self

Date  
10/23/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Fauerbacher, Carl

Amount of Contribution (\$)

\$250.00

Contributor address; City; State; Zip Code  
8312 Navidad Dr.  
  
Austin, TX 78735

Principal occupation / Job title (See Instructions)  
Insurance

Employer (See Instructions)  
Self

Date  
10/25/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Fisher, Judy

Amount of Contribution (\$)

\$350.00

Contributor address; City; State; Zip Code  
2602 Broken Oak Dr.  
  
Austin, TX 78745

Principal occupation / Job title (See Instructions)  
Requested

Employer (See Instructions)  
Requested

Date  
10/25/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Fisher, Robert

Amount of Contribution (\$)

\$350.00

Contributor address; City; State; Zip Code  
2602 Broken Oak Dr.  
  
Austin, TX 78745

Principal occupation / Job title (See Instructions)  
Requested

Employer (See Instructions)  
Requested

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/42 Rpt: 13/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/25/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Patrick <hr/> <b>6</b> Contributor address; City; State; Zip Code 4638 S. Lamar  Austin, TX 78745	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>8</b> Principal occupation / Job title (See Instructions) Construction		<b>9</b> Employer (See Instructions) Flynn Construction
<b>Date</b> 10/16/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Mercedes A. <hr/> <b>Contributor address; City; State; Zip Code</b> 5900 Waymaker Cv.  Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$200.00
<b>Principal occupation / Job title (See Instructions)</b> Requested		<b>Employer (See Instructions)</b> Requested
<b>Date</b> 10/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallagher, Belinda <hr/> <b>Contributor address; City; State; Zip Code</b> 4600 High Gate Dr.  Austin, TX 78730	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Homemaker		<b>Employer (See Instructions)</b> NA
<b>Date</b> 10/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallagher, Gary <hr/> <b>Contributor address; City; State; Zip Code</b> 4600 High Gate Dr.  Austin, TX 78730	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> V. President		<b>Employer (See Instructions)</b> Etegnis
<b>Date</b> 10/03/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallo, Anthony <hr/> <b>Contributor address; City; State; Zip Code</b> PO Box 26550  Austin, TX 78755	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> SAAS Consulting		<b>Employer (See Instructions)</b> Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 11/42 Rpt: 14/66

2 FILER NAME  
Gallo, Sheri

3 Filer ID

4 Date  
10/08/2016

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Garber, Hailey

7 Amount of Contribution (\$)  
\$175.00

6 Contributor address; City; State; Zip Code  
1221 2nd Ave  
Ste. 320  
Seattle, WA 98101

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
10/08/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Garber, Harrison

Amount of Contribution (\$)  
\$350.00

Contributor address; City; State; Zip Code  
Requested  
Requested, WA 98101

Principal occupation / Job title (See Instructions)  
Requested

Employer (See Instructions)  
Requested

Date  
10/07/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Garber, Laurie

Amount of Contribution (\$)  
\$350.00

Contributor address; City; State; Zip Code  
3105 Westlake Dr.  
Austin, TX 78746

Principal occupation / Job title (See Instructions)  
Requested

Employer (See Instructions)  
Requested

Date  
10/03/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Garber, Requested

Amount of Contribution (\$)  
\$350.00

Contributor address; City; State; Zip Code  
600 Fir Court  
Norwood, NJ 17648

Principal occupation / Job title (See Instructions)  
Requested

Employer (See Instructions)  
Requested

Date  
10/07/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Garber, Ross

Amount of Contribution (\$)  
\$350.00

Contributor address; City; State; Zip Code  
3105 Westlake Dr.  
Austin, TX 78746

Principal occupation / Job title (See Instructions)  
Requested

Employer (See Instructions)  
Requested

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/42 Rpt: 15/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/08/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garber, Ross <hr/> <b>6</b> Contributor address; City; State; Zip Code 1221 2nd Ave Ste. 320 Seattle, WA 98101	<b>7</b> Amount of Contribution (\$)  \$175.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garber, Scott J. <hr/> Contributor address; City; State; Zip Code 600 Fir Court  Norwood, NJ 17648	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaylord, Eric <hr/> Contributor address; City; State; Zip Code 5802 Sierra Madre  Austin, TX 78759	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Sierra Homes Project & Design
Date 10/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giles, Casey <hr/> Contributor address; City; State; Zip Code 5103 Split Cedar Cr.  Austin, TX 78735	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) PSW
Date 10/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goff, Eric <hr/> Contributor address; City; State; Zip Code 2500 E. 2nd St.  Austin, TX 78702	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Citigroup

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/42 Rpt: 16/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/27/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golding, Rob <hr/> <b>6</b> Contributor address; City; State; Zip Code 4008 Idlewild Rd.  Austin, TX 78731	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 10/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Arthur A. <hr/> <b>Contributor address; City; State; Zip Code</b> 1700 Ravey St. # B Austin, TX 78704	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Requested		<b>Employer (See Instructions)</b> Requested
<b>Date</b> 10/19/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Chuck <hr/> <b>Contributor address; City; State; Zip Code</b> 811 E. 11th St. # 432 Austin, TX 78702	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Executive		<b>Employer (See Instructions)</b> Spire Foot
<b>Date</b> 10/24/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregorcyk, David <hr/> <b>Contributor address; City; State; Zip Code</b> 3200 Grandview # 6 Austin, TX 78705	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Requested		<b>Employer (See Instructions)</b> Requested
<b>Date</b> 10/24/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregorcyk, Jennifer <hr/> <b>Contributor address; City; State; Zip Code</b> 3200 Grandview # 6 Austin, TX 78705	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Requested		<b>Employer (See Instructions)</b> Requested



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/42 Rpt: 17/66
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 10/23/2016	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: Requested) HDR, Inc. PAC	7 Amount of Contribution (\$) \$350.00
	6 Contributor address; City; State; Zip Code 8404 Indian Hills Dr.  Omaha, NE 68114	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/14/2016	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: Requested) HNTB Holdings LTD PAC	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 715 Kick Dr.  Kansas City, MO 64105	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ) Hanslik, Edward	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 5800 Kentucky Derby  Austin, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ) Hay, John	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 2103 Sharon Ln.  Austin, TX 78703	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Hay Legal Group PLLC
Date 10/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ) Herring, Lisa	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 1000 E. 38th St.  Austin, TX 78705	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 15/42 Rpt: 18/66

2 FILER NAME  
Gallo, Sheri

3 Filer ID

4 Date  
10/14/2016

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Herring, William

7 Amount of Contribution (\$)  
\$25.00

6 Contributor address; City; State; Zip Code  
1000 E. 38th St.  
  
Austin, TX 78705

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
10/18/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Hobby, William

Amount of Contribution (\$)  
\$350.00

Contributor address; City; State; Zip Code  
PO Box 326  
  
Houston, TX 77001

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
NA

Date  
10/03/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Hooser, Greg

Amount of Contribution (\$)  
\$350.00

Contributor address; City; State; Zip Code  
4501 Westlake Dr.  
# 14  
Austin, TX 78746

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
NA

Date  
10/16/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Hoover, Nancy D.

Amount of Contribution (\$)  
\$50.00

Contributor address; City; State; Zip Code  
3201 Riva Ridge Rd.  
  
Austin, TX 78746

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
10/06/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Jacobson, Benjamin

Amount of Contribution (\$)  
\$350.00

Contributor address; City; State; Zip Code  
5500 Kite Tail Dr.  
  
Austin, TX 78730

Principal occupation / Job title (See Instructions)  
Requested

Employer (See Instructions)  
Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/42 Rpt: 19/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/06/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobson, Janine <hr/> <b>6</b> Contributor address; City; State; Zip Code 5500 Kite Tail Dr.  Austin, TX 78730	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>8</b> Principal occupation / Job title (See Instructions) Requested		<b>9</b> Employer (See Instructions) Self
<b>Date</b> 10/14/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Robert <hr/> <b>Contributor address; City; State; Zip Code</b> 1404 Ethridge  Austin, TX 78703	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> ABC Home & Commercial Services
<b>Date</b> 10/11/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kathy <hr/> <b>Contributor address; City; State; Zip Code</b> 4105 Shimmering Cv.  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> NA
<b>Date</b> 10/11/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Tom <hr/> <b>Contributor address; City; State; Zip Code</b> 4105 Shimmering Cv.  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Executive		<b>Employer (See Instructions)</b> AGC of Texas
<b>Date</b> 10/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Justit, Manuel J. <hr/> <b>Contributor address; City; State; Zip Code</b> 4806 Precipice Cove  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$200.00
<b>Principal occupation / Job title (See Instructions)</b> Dean		<b>Employer (See Instructions)</b> University of Texas

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/42 Rpt: 20/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/25/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaspar, Ma <hr/> <b>6</b> Contributor address; City; State; Zip Code 10521 Pointe View Dr.  Austin, TX 78738	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 10/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsey, Douglas <hr/> <b>Contributor address; City; State; Zip Code</b> 11200 Deadoak Ln.  Austin, TX 78759	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Requested		<b>Employer (See Instructions)</b> Requested
<b>Date</b> 10/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsey, Ellen <hr/> <b>Contributor address; City; State; Zip Code</b> 11200 Deadoak Ln.  Austin, TX 78759	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Requested		<b>Employer (See Instructions)</b> Requested
<b>Date</b> 10/10/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Khataw, Ali Raza <hr/> <b>Contributor address; City; State; Zip Code</b> 7914 Bee Caves Rd.  Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$175.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/10/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Khataw, Nahid <hr/> <b>Contributor address; City; State; Zip Code</b> 7914 Bee Caves Rd.  Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$175.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/42 Rpt: 21/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/23/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kochwelp, Bill <hr/> <b>6</b> Contributor address; City; State; Zip Code 10101 Eastman Cv.  Austin, TX 78750	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Broker		<b>9</b> Employer (See Instructions) First Austin Properties
<b>Date</b> 10/24/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Kumar, Hema <hr/> <b>Contributor address; City; State; Zip Code</b> 1628 Westlake Dr.  Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Requested		<b>Employer (See Instructions)</b> Requested
<b>Date</b> 10/24/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Kumar, Sam <hr/> <b>Contributor address; City; State; Zip Code</b> 1628 Westlake Dr.  Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Requested		<b>Employer (See Instructions)</b> Requested
<b>Date</b> 10/11/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamon, Matthew <hr/> <b>Contributor address; City; State; Zip Code</b> 2605 Enfield Rd. # 217 Austin, TX 78703	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Elected Official Staff		<b>Employer (See Instructions)</b> State of Texas
<b>Date</b> 10/16/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Landrey, Zachary <hr/> <b>Contributor address; City; State; Zip Code</b> 2401 Never Bend Cv.  Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$150.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 19/42 Rpt: 22/66

**2** FILER NAME

Gallo, Sheri

**3** Filer ID

**4** Date

10/15/2016

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Linebarger, Dale

**6** Contributor address; City; State; Zip Code

3 Niles Rd

Austin, TX 78703

**7** Amount of Contribution (\$)

\$350.00

**8** Principal occupation / Job title (See Instructions)

Attorney

**9** Employer (See Instructions)

Self

Date

10/15/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Linebarger, Libby

Contributor address; City; State; Zip Code

3 Niles Rd

Austin, TX 78703

Amount of Contribution (\$)

\$350.00

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

NA

Date

10/15/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Littlefield, Jennifer

Contributor address; City; State; Zip Code

7906 Henry Kinney Row

Austin, TX 78749

Amount of Contribution (\$)

\$25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/15/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Littlefield, Mark

Contributor address; City; State; Zip Code

7906 Henry Kinney Row

Austin, TX 78749

Amount of Contribution (\$)

\$25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/25/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lockart, James

Contributor address; City; State; Zip Code

PO Box 27187

Austin, TX 78755

Amount of Contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 20/42 Rpt: 23/66

2 FILER NAME

Gallo, Sheri

3 Filer ID

4 Date

10/14/2016

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Locke Lord LLP Firm PAC

7 Amount of Contribution (\$)

\$350.00

6 Contributor address; City; State; Zip Code

2200 Ross Ave.

Ste. 2200

Dallas, TX 75201

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/14/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lockwood, Andrews, & Newman PAC

Amount of Contribution (\$)

\$350.00

Contributor address; City; State; Zip Code

2925 Briarpark Dr.

Ste. 400

Houston, TX 77042

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/21/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Loukas, Demetrius

Amount of Contribution (\$)

\$350.00

Contributor address; City; State; Zip Code

4611 Ridge Oak Dr.

Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Oncologist

Texas Oncology

Date

10/21/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Loukas, Janis

Amount of Contribution (\$)

\$350.00

Contributor address; City; State; Zip Code

4611 Ridge Oak Dr.

Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Retired

NA

Date

10/13/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lynch, Michele Rogerson

Amount of Contribution (\$)

\$50.00

Contributor address; City; State; Zip Code

5520 Wild Foxglove Rd.

Spicewood, TX 78669

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/42 Rpt: 24/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/05/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madere, Pamela <hr/> <b>6</b> Contributor address; City; State; Zip Code 4207 Bennedict Lane  Austin, TX 78746	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Coats, Rose
<b>Date</b> 10/09/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Maier, Richard <hr/> <b>Contributor address; City; State; Zip Code</b> 704 E. 45th 1/2 St.  Austin, TX 78751	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Homebuilder		<b>Employer (See Instructions)</b> Lenmar
<b>Date</b> 10/20/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Cindy <hr/> <b>Contributor address; City; State; Zip Code</b> 6413 Williams Ridge Way  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Bookkeeper		<b>Employer (See Instructions)</b> ASSO Management
<b>Date</b> 10/20/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Michael <hr/> <b>Contributor address; City; State; Zip Code</b> 6413 Williams Ridge Way  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> ASSO Executive		<b>Employer (See Instructions)</b> ASSO Management
<b>Date</b> 10/11/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Martine, Carol <hr/> <b>Contributor address; City; State; Zip Code</b> 836 Old Spicewood Rd.  Cypress Mill, TX 78663	<b>Amount of Contribution (\$)</b>  \$175.00
<b>Principal occupation / Job title (See Instructions)</b> President		<b>Employer (See Instructions)</b> Martine Properties



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/42 Rpt: 25/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/11/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martine, Tom <hr/> <b>6</b> Contributor address; City; State; Zip Code 836 Old Spicewood Rd.  Cypress Mill, TX 78663	<b>7</b> Amount of Contribution (\$)  \$175.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) Martine Properties
<b>Date</b> 10/16/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, David <hr/> <b>Contributor address; City; State; Zip Code</b> 2706 Macken St.  Austin, TX 78703	<b>Amount of Contribution (\$)</b>  \$125.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/16/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Mary <hr/> <b>Contributor address; City; State; Zip Code</b> 2706 Macken St.  Austin, TX 78703	<b>Amount of Contribution (\$)</b>  \$125.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/07/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) McKay, Kathleen <hr/> <b>Contributor address; City; State; Zip Code</b> 11339 Taylor Draper Ln.  Austin, TX 78759	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> NA
<b>Date</b> 10/07/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) McKay, Thomas <hr/> <b>Contributor address; City; State; Zip Code</b> 11339 Taylor Draper Ln.  Austin, TX 78759	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Businessman		<b>Employer (See Instructions)</b> Tom's Way, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 23/42 Rpt: 26/66

2 FILER NAME

Gallo, Sheri

3 Filer ID

4 Date

10/13/2016

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Metcalfe, Sally

7 Amount of Contribution (\$)

\$25.00

6 Contributor address; City; State; Zip Code

388 Cortona Dr.

Austin, TX 78746

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/13/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Metcalfe, Steven

Amount of Contribution (\$)

\$25.00

Contributor address; City; State; Zip Code

388 Cortona Dr.

Austin, TX 78746

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/12/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Miller, Don A.

Amount of Contribution (\$)

\$250.00

Contributor address; City; State; Zip Code

9001 Wintercreeper Cv.

Austin, TX 78735

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Owner

The County Line

Date

10/12/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Miller, Vanessa

Amount of Contribution (\$)

\$250.00

Contributor address; City; State; Zip Code

9001 Wintercreeper Cv.

Austin, TX 78735

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Owner

The County Line

Date

10/16/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mobley, Ann

Amount of Contribution (\$)

\$200.00

Contributor address; City; State; Zip Code

2801 W. 35th St.

Austin, TX 78703

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Retired

NA

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/42 Rpt: 27/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/16/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moblely, John <hr/> <b>6</b> Contributor address; City; State; Zip Code 2801 W. 35th St.  Austin, TX 78703	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
<b>Date</b> 10/12/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Moceri, Closs <hr/> <b>Contributor address; City; State; Zip Code</b> 12611 Cedar St.  Austin, TX 78732	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Real Estate Developer		<b>Employer (See Instructions)</b> Presidium Group, LLC
<b>Date</b> 10/12/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Moceri, Susan <hr/> <b>Contributor address; City; State; Zip Code</b> 12611 Cedar St.  Austin, TX 78732	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Homemaker		<b>Employer (See Instructions)</b> NA
<b>Date</b> 10/13/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, Putnam <hr/> <b>Contributor address; City; State; Zip Code</b> 4705 Balcones Dr.  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/07/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) More, George <hr/> <b>Contributor address; City; State; Zip Code</b> 2904 Hillview Rd.  Austin, TX 78703	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/42 Rpt: 28/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/07/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) More, Marion <hr/> <b>6</b> Contributor address; City; State; Zip Code 2904 Hillview Rd.  Austin, TX 78703	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 10/11/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Bill <hr/> <b>Contributor address; City; State; Zip Code</b> 10605 Spicewood Club Dr.  Austin, TX 78750	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/24/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Suzy <hr/> <b>Contributor address; City; State; Zip Code</b> 100 Lido Circle B-1 Lakeway, TX 78734	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/05/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Moulinet, Nick <hr/> <b>Contributor address; City; State; Zip Code</b> 15201 Gebron Dr.  Lakeway, TX 78734	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Business Development		<b>Employer (See Instructions)</b> Stantec
<b>Date</b> 10/14/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Niendorff, Frank <hr/> <b>Contributor address; City; State; Zip Code</b> 2900 Pecos  Austin, TX 78703	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 26/42 Rpt: 29/66

2 FILER NAME

Gallo, Sheri

3 Filer ID

4 Date

10/14/2016

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Niendorff, Kathleen

7 Amount of Contribution (\$)

\$50.00

6 Contributor address; City; State; Zip Code

2900 Pecos

Austin, TX 78703

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/13/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Novy, Brian M.

Amount of Contribution (\$)

\$125.00

Contributor address; City; State; Zip Code

3913 Edgerock Dr.

Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/13/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Novy, Ilene L.

Amount of Contribution (\$)

\$125.00

Contributor address; City; State; Zip Code

3913 Edgerock Dr.

Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/26/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Perkins, Lauren

Amount of Contribution (\$)

\$50.00

Contributor address; City; State; Zip Code

3702 Soaring Eagle

Austin, TX 78746

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/11/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Peterson, Christian

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

1114 Lost Creek Blvd.

Ste. 200

Austin, TX 78746

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/42 Rpt: 30/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/11/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pike, Debbie <hr/> <b>6</b> Contributor address; City; State; Zip Code 101 Colorado St. Ste. 3402 Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$175.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 10/11/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Pike Jr., HM <hr/> <b>Contributor address; City; State; Zip Code</b> 101 Colorado St. Ste. 3402 Austin, TX 78701	<b>Amount of Contribution (\$)</b>  \$175.00
<b>Principal occupation / Job title (See Instructions)</b> President		<b>Employer (See Instructions)</b> The Sutton Co.
<b>Date</b> 10/20/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Portnoy, Steven <hr/> <b>Contributor address; City; State; Zip Code</b> 7617 Journeyville Dr.  Austin, TX 78735	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Real Estate		<b>Employer (See Instructions)</b> Self
<b>Date</b> 10/15/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Rebecca <hr/> <b>Contributor address; City; State; Zip Code</b> 1036 Liberty Park Dr. # 36 Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> Agent		<b>Employer (See Instructions)</b> Watkins Insurance Group
<b>Date</b> 10/25/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Rob <hr/> <b>Contributor address; City; State; Zip Code</b> 4016 Sierra Dr.  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/42 Rpt: 31/66
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 10/04/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raven, Joyce	7 Amount of Contribution (\$) \$125.00
	6 Contributor address; City; State; Zip Code 7304 Reed Dr.  Leander, TX 78641	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raven, Louie	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code 7304 Reed Dr.  Leander, TX 78641	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Billy	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 4100 McBrine Pl.  Austin, TX 78746	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Reagan Outdoor Advertising
Date 10/17/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Lucy	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 4100 McBrine Pl.  Austin, TX 78746	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) NA
Date 10/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodus, David T.	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code PO Box 65  Guffey, CO 80820	
Principal occupation / Job title (See Instructions) Requested		Employer (See Instructions) Requested

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 29/42 Rpt: 32/66

2 FILER NAME

Gallo, Sheri

3 Filer ID

4 Date  
10/24/2016

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Riordan, Lydia

7 Amount of Contribution (\$) \$50.00

6 Contributor address; City; State; Zip Code  
10606 Oak Valley Ct.  
  
Austin, TX 78736

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
10/24/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Riordan, Patrick

Amount of Contribution (\$) \$50.00

Contributor address; City; State; Zip Code  
10606 Oak Valley Ct.  
  
Austin, TX 78736

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
10/07/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Rodrigues, Jose J.

Amount of Contribution (\$) \$350.00

Contributor address; City; State; Zip Code  
U Shell St.  
  
New Bedford, MA 12744

Principal occupation / Job title (See Instructions)  
Requested

Employer (See Instructions)  
Requested

Date  
10/05/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Rubin, Jay

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code  
10609 McFarlie Cove  
  
Austin, TX 78750

Principal occupation / Job title (See Instructions)  
NonProfit Consultant

Employer (See Instructions)  
Self

Date  
10/02/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Rutishauser, Robert

Amount of Contribution (\$) \$250.00

Contributor address; City; State; Zip Code  
4200 Jackson Ave.  
Apt. 5015  
Austin, TX 78731

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
NA



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 30/42 Rpt: 33/66

2 FILER NAME

Gallo, Sheri

3 Filer ID

4 Date  
10/22/2016

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Sager, Alan

7 Amount of Contribution (\$)  
\$350.00

6 Contributor address; City; State; Zip Code  
7801 N. Lamar  
A114  
Austin, TX 78752

8 Principal occupation / Job title (See Instructions)  
Entrepreneur

9 Employer (See Instructions)  
Self

Date  
10/22/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Sager, Susan

Amount of Contribution (\$)  
\$350.00

Contributor address; City; State; Zip Code  
7801 N. Lamar  
A114  
Austin, TX 78752

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
NA

Date  
10/06/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Salomon, Bruce

Amount of Contribution (\$)  
\$350.00

Contributor address; City; State; Zip Code  
4911 Elizabeth Jane Ct.  
Austin, TX 78730

Principal occupation / Job title (See Instructions)  
Finance

Employer (See Instructions)  
Eiberon LLC

Date  
10/06/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Salomon, Linda

Amount of Contribution (\$)  
\$350.00

Contributor address; City; State; Zip Code  
4911 Elizabeth Jane Ct.  
Austin, TX 78730

Principal occupation / Job title (See Instructions)  
Homemaker

Employer (See Instructions)  
NA

Date  
10/27/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Saunders, Stephen

Amount of Contribution (\$)  
\$100.00

Contributor address; City; State; Zip Code  
2630 Exposition Blvd.  
Ste. 203  
Austin, TX 78703

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 31/42 Rpt: 34/66

**2** FILER NAME

Gallo, Sheri

**3** Filer ID

**4** Date

10/18/2016

**5** Full name of contributor

Schele, David

☐ out-of-state PAC (ID#: \_\_\_\_\_)

**7** Amount of Contribution (\$)

\$50.00

**6** Contributor address; City; State; Zip Code

5604 Lemonwood Dr.

Austin, TX 78731

**8** Principal occupation / Job title (See Instructions)

Architect

**9** Employer (See Instructions)

Felder Group Architects

Date

10/06/2016

Full name of contributor

Schmitt, Karla

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Contribution (\$)

\$350.00

Contributor address; City; State; Zip Code

8809 Mount Batten Circle

Austin, TX 78730

Principal occupation / Job title (See Instructions)

Requested

Employer (See Instructions)

Requested

Date

10/06/2016

Full name of contributor

Schmitt, Sandra

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Contribution (\$)

\$350.00

Contributor address; City; State; Zip Code

8809 Mount Batten Circle

Austin, TX 78730

Principal occupation / Job title (See Instructions)

UCB Designer

Employer (See Instructions)

Edgenuity

Date

10/02/2016

Full name of contributor

Schultz, Robert

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Contribution (\$)

\$101.00

Contributor address; City; State; Zip Code

4105 Cat Mountain Dr.

Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/25/2016

Full name of contributor

Scott, Bradley S.

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Contribution (\$)

\$350.00

Contributor address; City; State; Zip Code

299 S. Main St.

Ste. 1300

Salt Lake City, UT 84111

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Summit Injury Law

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/42 Rpt: 35/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/11/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Marietta <hr/> <b>6</b> Contributor address; City; State; Zip Code 2901 Oakhurst  Austin, TX 78703	<b>7</b> Amount of Contribution (\$)  \$175.00
<b>8</b> Principal occupation / Job title (See Instructions) Realtor		<b>9</b> Employer (See Instructions) Wilson Goldrick
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott III, Wallace <hr/> Contributor address; City; State; Zip Code 2901 Oakhurst  Austin, TX 78703	Amount of Contribution (\$)  \$175.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Sutton Company
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sellers, Araminta <hr/> Contributor address; City; State; Zip Code 3307 Perry Ln.  Austin, TX 78731	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sellers, Tom <hr/> Contributor address; City; State; Zip Code 3307 Perry Ln.  Austin, TX 78731	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Conoco Phillips
Date 10/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shiv, Chester <hr/> Contributor address; City; State; Zip Code 1285 Sutter St. Unit 802 San Francisco, CA 94109	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Emerald Therapeutics, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/42 Rpt: 36/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/06/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, Jennifer <hr/> <b>6</b> Contributor address; City; State; Zip Code 11 Cousteau Ln.  Austin, TX 78746	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>8</b> Principal occupation / Job title (See Instructions) Executive		<b>9</b> Employer (See Instructions) Skinner Transportaion
<b>Date</b> 10/03/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, LeAnne <hr/> <b>Contributor address; City; State; Zip Code</b> 4127 Honeycomb Rock Circle  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Dietician		<b>Employer (See Instructions)</b> Austin Nutrition Consultants
<b>Date</b> 10/03/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner II, Stephen <hr/> <b>Contributor address; City; State; Zip Code</b> 11 Cousteau Ln.  Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Vice President		<b>Employer (See Instructions)</b> Skinner Transportaion
<b>Date</b> 10/03/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, Steve <hr/> <b>Contributor address; City; State; Zip Code</b> 4127 Honeycomb Rock Circle  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> CEO		<b>Employer (See Instructions)</b> Skinner Transportation
<b>Date</b> 10/15/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Terral <hr/> <b>Contributor address; City; State; Zip Code</b> 6304 Cat Mountain Cv.  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Attorney		<b>Employer (See Instructions)</b> Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 34/42 Rpt: 37/66

2 FILER NAME  
Gallo, Sheri

3 Filer ID

4 Date  
10/13/2016

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Soeur, Channy

7 Amount of Contribution (\$) \$350.00

6 Contributor address; City; State; Zip Code  
7908 Cameron Rd  
Austin, TX 78754

8 Principal occupation / Job title (See Instructions)  
CEO

9 Employer (See Instructions)  
CAS Consulting

Date  
10/13/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Soeur, Laura

Amount of Contribution (\$) \$350.00

Contributor address; City; State; Zip Code  
7908 Cameron Rd  
Austin, TX 78754

Principal occupation / Job title (See Instructions)  
Manager

Employer (See Instructions)  
CAS Consulting

Date  
10/24/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Straub, Joseph

Amount of Contribution (\$) \$125.00

Contributor address; City; State; Zip Code  
7903 Jester Blvd.  
Austin, TX 78750

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
10/24/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Straub, Kim

Amount of Contribution (\$) \$125.00

Contributor address; City; State; Zip Code  
7903 Jester Blvd.  
Austin, TX 78750

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
10/14/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Stuart, Donald

Amount of Contribution (\$) \$113.00

Contributor address; City; State; Zip Code  
4105 Long Champ Dr.  
Austin, TX 78746

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 35/42 Rpt: 38/66

2 FILER NAME

Gallo, Sheri

3 Filer ID

4 Date

10/14/2016

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Stuart, Loraine

7 Amount of Contribution (\$)

\$112.00

6 Contributor address; City; State; Zip Code

4105 Long Champ Dr.

Austin, TX 78746

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/25/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Sullivan, Connee

Amount of Contribution (\$)

\$350.00

Contributor address; City; State; Zip Code

2904 Waterbank Cv.

Austin, TX 78746

Principal occupation / Job title (See Instructions)

Interim General Director

Employer (See Instructions)

Austin Opera

Date

10/25/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Sullivan, Kent

Amount of Contribution (\$)

\$350.00

Contributor address; City; State; Zip Code

2904 Waterbank Cv.

Austin, TX 78746

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Jackson Walker

Date

10/25/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Swan, Laurie J.

Amount of Contribution (\$)

\$350.00

Contributor address; City; State; Zip Code

1611 Northwood Rd.

Austin, TX 78703

Principal occupation / Job title (See Instructions)

V.President

Employer (See Instructions)

Stratus

Date

10/10/2016

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Thompson Jr., A. Leon

Amount of Contribution (\$)

\$200.00

Contributor address; City; State; Zip Code

1301 Capital of Tx Hwy S.

Ste. A234

Austin, TX 78741

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Thompson Properties

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/42 Rpt: 39/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/24/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, William <hr/> <b>6</b> Contributor address; City; State; Zip Code 1010 Mopac Circle  Austin, TX 78746	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Dentist		<b>9</b> Employer (See Instructions) Self
<b>Date</b> 10/24/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, Wissie <hr/> <b>Contributor address; City; State; Zip Code</b> 1010 Mopac Circle  Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$200.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> NA
<b>Date</b> 10/09/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Jeff <hr/> <b>Contributor address; City; State; Zip Code</b> 3604 Westlake Dr.  Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> Real Estate Broker		<b>Employer (See Instructions)</b> EDGE Realty Partners
<b>Date</b> 10/25/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Unruh, Justin <hr/> <b>Contributor address; City; State; Zip Code</b> 1704 West Ave. # 304 Austin, TX 78701	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/04/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDeGraaf, Margaret <hr/> <b>Contributor address; City; State; Zip Code</b> 5315 Valburn Cr.  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 37/42 Rpt: 40/66

2 FILER NAME

Gallo, Sheri

3 Filer ID

4 Date  
10/04/2016

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
VanDeGraaf, William

7 Amount of Contribution (\$) \$25.00

6 Contributor address; City; State; Zip Code  
5315 Valburn Cr.  
  
Austin, TX 78731

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
10/04/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Von Dohlen, Chris

Amount of Contribution (\$) \$175.00

Contributor address; City; State; Zip Code  
1406 Kent Ln.  
  
Austin, TX 78703

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
10/04/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Von Dohlen, Teresa

Amount of Contribution (\$) \$175.00

Contributor address; City; State; Zip Code  
1406 Kent Ln.  
  
Austin, TX 78703

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
10/26/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Walker, Auddie

Amount of Contribution (\$) \$125.00

Contributor address; City; State; Zip Code  
2303 Cheswick Ct.  
  
Austin, TX 78746

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
10/04/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Walker, Danny

Amount of Contribution (\$) \$350.00

Contributor address; City; State; Zip Code  
209 Jaydee Terrace  
  
Georgetown, TX 78628

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Business Development

Self



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 38/42 Rpt: 41/66

2 FILER NAME  
Gallo, Sheri

3 Filer ID

4 Date  
10/04/2016

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Walker, Diana

7 Amount of Contribution (\$)  
\$350.00

6 Contributor address; City; State; Zip Code  
209 Jaydee Terrace  
  
Georgetown, TX 78628

8 Principal occupation / Job title (See Instructions)  
Retired

9 Employer (See Instructions)  
NA

Date  
10/04/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Walker, Dillon

Amount of Contribution (\$)  
\$350.00

Contributor address; City; State; Zip Code  
2101 Griswold Lane  
  
Austin, TX 78703

Principal occupation / Job title (See Instructions)  
Business Development

Employer (See Instructions)  
Self

Date  
10/26/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Walker, Philip

Amount of Contribution (\$)  
\$125.00

Contributor address; City; State; Zip Code  
2303 Cheswick Ct.  
  
Austin, TX 78746

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
10/27/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Weber, Fred

Amount of Contribution (\$)  
\$125.00

Contributor address; City; State; Zip Code  
9302 Knoll Crest Loop  
  
Austin, TX 78759

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
10/27/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Weber, Ginger

Amount of Contribution (\$)  
\$125.00

Contributor address; City; State; Zip Code  
9302 Knoll Crest Loop  
  
Austin, TX 78759

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 39/42 Rpt: 42/66

2 FILER NAME  
Gallo, Sheri

3 Filer ID

4 Date  
10/16/2016

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Wheelus, Cleveland Daniel

7 Amount of Contribution (\$)  
\$350.00

6 Contributor address; City; State; Zip Code  
3103 Bee Caves Rd.  
Ste. 201  
Austin, TX 78746

8 Principal occupation / Job title (See Instructions)  
Attorney

9 Employer (See Instructions)  
Wheelus Law

Date  
10/16/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Wheelus, Estella

Amount of Contribution (\$)  
\$350.00

Contributor address; City; State; Zip Code  
3103 Bee Caves Rd.  
Ste. 201  
Austin, TX 78746

Principal occupation / Job title (See Instructions)  
Requested

Employer (See Instructions)  
Requested

Date  
10/06/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Whitney, Leon A.

Amount of Contribution (\$)  
\$100.00

Contributor address; City; State; Zip Code  
3909 Rockledge Dr.  
Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
10/04/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Wilhite, Phillip

Amount of Contribution (\$)  
\$50.00

Contributor address; City; State; Zip Code  
5326 Western Hills  
Austin, TX 78731

Principal occupation / Job title (See Instructions)  
M&A Professional

Employer (See Instructions)  
Self

Date  
10/13/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Williams, Talley

Amount of Contribution (\$)  
\$100.00

Contributor address; City; State; Zip Code  
8209 Dark Ridge Cv.  
Austin, TX 78737

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/42 Rpt: 43/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/24/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Brent <hr/> <b>6</b> Contributor address; City; State; Zip Code 3401 Fritz Hughes Park Rd.  Austin, TX 78723	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>8</b> Principal occupation / Job title (See Instructions) Project R&D		<b>9</b> Employer (See Instructions) Journeyman Construction
<b>Date</b> 10/16/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rogers <hr/> <b>Contributor address; City; State; Zip Code</b> 5902 N. West Pl.  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$150.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/19/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Ross <hr/> <b>Contributor address; City; State; Zip Code</b> 811 Christopher St.  Austin, TX 78704	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Developer		<b>Employer (See Instructions)</b> PSW
<b>Date</b> 10/16/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Sandra <hr/> <b>Contributor address; City; State; Zip Code</b> 5902 N. West Pl.  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$150.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/11/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Winstead, Pete <hr/> <b>Contributor address; City; State; Zip Code</b> 79 Pascal Ln.  Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 41/42 Rpt: 44/66

2 FILER NAME  
Gallo, Sheri

3 Filer ID

4 Date  
10/11/2016

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Winstead, Tomi

7 Amount of Contribution (\$) \$25.00

6 Contributor address; City; State; Zip Code  
79 Pascal Ln.  
  
Austin, TX 78746

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
10/16/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Winters, David Trevor

Amount of Contribution (\$) \$25.00

Contributor address; City; State; Zip Code  
3205 Riva Ridge Rd.  
  
Austin, TX 78746

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
10/07/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Wojtewicz, Chris

Amount of Contribution (\$) \$25.00

Contributor address; City; State; Zip Code  
8409 Adirondack Trl.  
  
Austin, TX 78759

Principal occupation / Job title (See Instructions)  
Management Analyst/Student

Employer (See Instructions)  
State of Texas

Date  
10/13/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Wolff, David A.

Amount of Contribution (\$) \$225.00

Contributor address; City; State; Zip Code  
1206 W. 8th St.  
  
Austin, TX 78701

Principal occupation / Job title (See Instructions)  
Real Estate

Employer (See Instructions)  
Drenner & Stewart

Date  
10/23/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Worob, Marc

Amount of Contribution (\$) \$75.00

Contributor address; City; State; Zip Code  
4604 W. Rim Cove  
  
Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 42/42 Rpt: 45/66

2 FILER NAME

Gallo, Sheri

3 Filer ID

4 Date

10/23/2016

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Worob, Phyllis

7 Amount of Contribution (\$)

\$75.00

6 Contributor address; City; State; Zip Code

4604 W. Rim Cove

Austin, TX 78731

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:  
Sch: 1/1 Rpt: 46/66

2 FILER NAME  
Gallo, Sheri

3 Filer ID

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date  
10/16/2016

6 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Inman, Bob

7 Contributor address; City; State; Zip Code  
3200 Riva Ridge Rd.

Austin, TX 78746

8 Amount of contribution (\$)  
\$350.00

9 In-kind contribution description  
Food & beverage for event

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)  
Professor

11 Employer (FOR NON-JUDICIAL) (See instructions)  
University of Texas

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date  
10/16/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Inman, Nancy

Contributor address; City; State; Zip Code  
3200 Riva Ridge Rd.

Austin, TX 78746

Amount of contribution (\$)  
\$350.00

In-kind contribution description  
Food & beverage for event

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)  
Retired

Employer (FOR NON-JUDICIAL) (See instructions)  
NA

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/9 Rpt: 47/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> Date 10/21/2016	<b>5</b> Payee name Citi Mastercard	
<b>6</b> Amount (\$) \$2,401.35	<b>7</b> Payee address; City; State; Zip Code Box 6062  Sioux Falls, SD 57117	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Itemized expenditures listed in Schedule F-4
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2016	Payee name Cygnol LLC	
Amount (\$) \$8,188.00	Payee address; City; State; Zip Code PO Box 17235  Galveston, TX 77552	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Poll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/05/2016	Payee name Democracy Engine LLC	
Amount (\$) \$106.27	Payee address; City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011	
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 Website donation fees
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  
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.

<b>1</b> Total pages Schedule F1: Sch: 2/9 Rpt: 48/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> Date 10/12/2016	<b>5</b> Payee name Democracy Engine LLC	
<b>6</b> Amount (\$) \$243.93	<b>7</b> Payee address; City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website donation fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/19/2016	Candidate/Officeholder name Democracy Engine LLC	Office sought Office held
Amount (\$) \$129.48	Payee address; City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011	
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 Website donation fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/26/2016	Candidate/Officeholder name Democracy Engine LLC	Office sought Office held
Amount (\$) \$188.24	Payee address; City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011	
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 Website donation fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		



# 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.

<b>1</b> Total pages Schedule F1: Sch: 3/9 Rpt: 49/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> Date 10/05/2016	<b>5</b> Payee name Democracy Engine LLC	
<b>6</b> Amount (\$) \$13.55	<b>7</b> Payee address; City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website donation fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/28/2016	Candidate/Officeholder name	Office sought
Amount (\$) \$80.57	Payee name Democracy Engine LLC	Office held
	Payee address; City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website donation fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/15/2016	Candidate/Officeholder name	Office sought
Amount (\$) \$1,000.00	Payee name Henning Productions	Office held
	Payee address; City; State; Zip Code 2003 North Lamar Suite 200 Austin, TX 78705	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</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 shoot
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# 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.

<b>1</b> Total pages Schedule F1: Sch: 4/9 Rpt: 50/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> Date 10/21/2016	<b>5</b> Payee name Henning Productions	
<b>6</b> Amount (\$) \$400.00	<b>7</b> Payee address; City; State; Zip Code 2003 North Lamar Suite 200 Austin, TX 78705	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TV ad
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/20/2016	Candidate/Officeholder name Left Hand Design	
Amount (\$) \$974.25	Payee address; City; State; Zip Code 7233 Manchaca Rd. Austin, TX 78745	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Affordability mailer
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/05/2016	Candidate/Officeholder name Malone, Ryan	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 807 Brazos Street #810 Austin, TX 78701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research
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.

<b>1</b> Total pages Schedule F1: Sch: 5/9 Rpt: 51/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> Date 10/25/2016	<b>5</b> Payee name McKinney, Tolliver	
<b>6</b> Amount (\$) \$840.00	<b>7</b> Payee address; City; State; Zip Code 3400 Speedway # 203 Austin, TX 78705	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office work
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		
Date 10/21/2016	Candidate/Officeholder name Paragon Printing	Office sought Office held
Amount (\$) \$1,741.13	Payee address; City; State; Zip Code 10423 McKalla Place Austin, TX 78758	
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 Muny printing
Complete ONLY if direct expenditure to benefit C/OH		
Date 10/26/2016	Candidate/Officeholder name Paragon Printing	Office sought Office held
Amount (\$) \$1,944.28	Payee address; City; State; Zip Code 10423 McKalla Place Austin, TX 78758	
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 Muny mailer #2
Complete ONLY if direct expenditure to benefit C/OH		

# 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.

<b>1</b> Total pages Schedule F1: Sch: 6/9 Rpt: 52/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> Date 10/17/2016	<b>5</b> Payee name Powell, Madison	
<b>6</b> Amount (\$) \$2,955.00	<b>7</b> Payee address; City; State; Zip Code 1903 West 32nd  Austin, TX 78703	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office work
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/25/2016	Candidate/Officeholder name Powell, Madison	
Amount (\$) \$3,185.00	Office sought Office held	
Date 10/25/2016	Payee name Powell, Madison	
Amount (\$) \$3,185.00	Payee address; City; State; Zip Code 1903 West 32nd  Austin, TX 78703	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office work
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/20/2016	Candidate/Officeholder name Roberson, Debbie	
Amount (\$) \$2,000.00	Office sought Office held	
Date 10/20/2016	Payee name Roberson, Debbie	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 11138 Brista Way  Austin, TX 78726	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office work
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.

<b>1</b> Total pages Schedule F1: Sch: 7/9 Rpt: 53/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> Date 10/25/2016	<b>5</b> Payee name Thomas Graphics	
<b>6</b> Amount (\$) \$7,552.00	<b>7</b> Payee address; City; State; Zip Code 9501 N. IH 35  Austin, TX 78753	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense NW Hills mailing
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		
Date 10/29/2016	Candidate/Officeholder name Payee name Thomas Graphics	Office sought Office held
Amount (\$) \$1,797.64	Payee address; City; State; Zip Code 9501 N. IH 35  Austin, TX 78753	
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 Great Hills mailer
Complete ONLY if direct expenditure to benefit C/OH		
Date 10/21/2016	Candidate/Officeholder name Payee name Thomas Graphics	Office sought Office held
Amount (\$) \$9,286.00	Payee address; City; State; Zip Code 9501 N. IH 35  Austin, TX 78753	
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 Affordability mailer
Complete ONLY if direct expenditure to benefit C/OH		

# 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.

<b>1</b> Total pages Schedule F1: Sch: 8/9 Rpt: 54/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> Date 10/25/2016	<b>5</b> Payee name Thompson, Katie Ann	
<b>6</b> Amount (\$) \$340.00	<b>7</b> Payee address; City; State; Zip Code 12700 Cloud Mountain Crossing  Austin, TX 78726	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office work
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/20/2016	Candidate/Officeholder name Thompson & Knight, LLP	Office sought Office held
Amount (\$) \$2,650.00	Payee address; City; State; Zip Code 98 San Jacinto Blvd. Suite 1900 Austin, TX 78701	
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 Legal services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/18/2016	Candidate/Officeholder name US Post Office Chimney Corners Station	Office sought Office held
Amount (\$) \$43.00	Payee address; City; State; Zip Code 3575 Far West Blvd.  Austin, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 PO Box rental
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# 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.

<b>1</b> Total pages Schedule F1: Sch: 9/9 Rpt: 55/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> Date 10/21/2016	<b>5</b> Payee name US Post Office Chimney Corners Station	
<b>6</b> Amount (\$) \$3,247.65	<b>7</b> Payee address; City; State; Zip Code 3575 Far West Blvd.  Austin, TX 78731	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Muny postage
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/26/2016	Candidate/Officeholder name US Post Office Chimney Corners Station	Office sought Office held
Amount (\$) \$3,748.83	Payee address; City; State; Zip Code 3575 Far West Blvd.  Austin, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Muny mailer #2 postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/11 Rpt: 56/66	2 FILER NAME Gallo, Sheri	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 10/15/2016	6 Payee name 34th St. Cafe
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7 Amount (\$) \$43.88	8 Payee address; City; State; Zip Code 1005 W. 34th St. Austin, TX 78705
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meal
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/01/2016	Payee name A1 Signs
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Amount (\$) \$284.31	Payee address; City; State; Zip Code 111-B N. Bell Blvd. Cedar Park, TX 78613
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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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 Signs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/11 Rpt: 57/66	2 FILER NAME Gallo, Sheri	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 09/30/2016	6 Payee name A1 Signs
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7 Amount (\$) \$2,673.78	8 Payee address; City; State; Zip Code 111-B N. Bell Blvd.  Cedar Park, TX 78613
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 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 Yardsigns & stakes
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/01/2016	Payee name Austin Terrier
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Amount (\$) \$24.35	Payee address; City; State; Zip Code 3435 Greystone  Austin, TX 78731
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meals
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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## EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 3/11 Rpt: 58/66		<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID	
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$	
<b>5</b> Date 10/06/2016		<b>6</b> Payee name Citi Mastercard			
<b>7</b> Amount (\$) \$31.64		<b>8</b> Payee address; City; State; Zip Code Box 6062  Sioux Falls, SD 57117			
<b>9</b> TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
<b>10</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service fee	
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/01/2016		Payee name Constant Contact			
Amount (\$) \$101.27		Payee address; City; State; Zip Code Reservoir Place 1601 Trapelo Road Waltham, MA 02451			
TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email service	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Office held					

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 4/11 Rpt: 59/66	2 FILER NAME Gallo, Sheri	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 09/30/2016	6 Payee name HEB
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7 Amount (\$) \$226.01	8 Payee address; City; State; Zip Code 7025 Village Center Dr. Austin, TX 78731
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Food for fundraiser
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/30/2016	Payee name Home Depot
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Amount (\$) \$51.87	Payee address; City; State; Zip Code 10515 N. Mopac Expressway Austin, TX 78759
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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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 Signs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 5/11 Rpt: 60/66	2 FILER NAME Gallo, Sheri	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 10/02/2016	6 Payee name Kneaded Pleasures
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7 Amount (\$) \$14.44	8 Payee address; City; State; Zip Code 3573 Far West Blvd.  Austin, TX 78731
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meals
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/30/2016	Payee name Nation Builder
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Amount (\$) \$29.00	Payee address; City; State; Zip Code 448 S. Hill Drive  Los Angeles, CA 90013
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Website
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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## EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 6/11 Rpt: 61/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
<b>5</b> Date 10/01/2016	<b>6</b> Payee name Office Depot	
<b>7</b> Amount (\$) \$62.80	<b>8</b> Payee address; City; State; Zip Code 2620 W. Anderson Ln. Austin, TX 78757	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2016	Payee name Office Depot	
Amount (\$) \$318.11	Payee address; City; State; Zip Code 2620 W. Anderson Ln. Austin, TX 78757	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 7/11 Rpt: 62/66	2 FILER NAME Gallo, Sheri	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 10/05/2016	6 Payee name Office Depot
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7 Amount (\$) \$146.12	8 Payee address; City; State; Zip Code 2620 W. Anderson Ln. Austin, TX 78757
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Office supplies
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/30/2016	Payee name Paragon Printing
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Amount (\$) \$2,109.01	Payee address; City; State; Zip Code 10423 McKalla Place Austin, TX 78758
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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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
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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**EXPENDITURES MADE BY CREDIT CARD****SCHEDULE F4****EXPENDITURE CATEGORIES FOR BOX 10(a)**Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political CommitteeEvent Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal ServicesLoan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract LaborSolicitation/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.

<b>1</b> Total pages Schedule F4: Sch: 8/11 Rpt: 63/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
<b>5</b> Date 09/30/2016	<b>6</b> Payee name Paragon Printing	
<b>7</b> Amount (\$) \$1,155.22	<b>8</b> Payee address; City; State; Zip Code 10423 McKalla Place Austin, TX 78758	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</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
<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2016	Payee name Post Net	
Amount (\$) \$3.78	Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 9/11 Rpt: 64/66		<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID	
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD					\$
<b>5</b> Date 10/06/2016		<b>6</b> Payee name Republican Club			
<b>7</b> Amount (\$) \$25.00		<b>8</b> Payee address; City; State; Zip Code 1609 Shoal Creek Blvd.  Austin, TX 78701			
<b>9</b> TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
<b>10</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting	
<b>11</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
<b>12</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	
<b>13</b> Date 10/01/2016		<b>14</b> Payee name Shalom Austin			
<b>15</b> Amount (\$) \$425.00		<b>16</b> Payee address; City; State; Zip Code 4007 Madrid Cove  Austin, TX 78759			
<b>17</b> TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
<b>18</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jewish Outlook Ad	
<b>19</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
<b>20</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	



# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 10/11 Rpt: 65/66	2 FILER NAME Gallo, Sheri	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 10/16/2016	6 Payee name Shalom Austin
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7 Amount (\$) \$425.00	8 Payee address; City; State; Zip Code 4007 Madrid Cove Austin, TX 78759
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
-----------------------	--------------------------------------------------------------------------------------

10 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 Jewish Outlook Ad
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/30/2016	Payee name US Post Office Chimney Corners Station
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Amount (\$) \$94.00	Payee address; City; State; Zip Code 3575 Far West Blvd. Austin, TX 78731
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Postage
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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**EXPENDITURES MADE BY CREDIT CARD****SCHEDULE F4****EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 11/11 Rpt: 66/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
<b>5</b> Date 10/10/2016	<b>6</b> Payee name Vista Print	
<b>7</b> Amount (\$) \$137.34	<b>8</b> Payee address; City; State; Zip Code 95 Hayden Ave. Lexington, MA 12451	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX. officeholder living expense Thank You cards
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held



# Candidate Bundling Report: Schedule ATX.5

Attach to C/OH Coversheet

AUSTIN CITY CLERK  
RECEIVED

2016 OCT 31 PM 3 25

Identify each person registered or required to register under City Code, Chapter 4-8 (Regulation of Lobbyists) who is employed by, or compensated to lobby by: (1) any bundler, (2) a business association through which the bundler does business, or (3) the bundler's employer.

Lobbyist First Name	Lobbyist Last Name	Lobbyist Street Address	Lobbyist City/State/Zip
Pamela	Madere	4207 Bennedict Lane	Austin/Tx/78746
Mark	Littlefield	7906 Henry Kinney Row	Austin/TX/78749



# Candidate Bundling Report: Schedule ATX.5

Attach to C/OH Coversheet

List each individual bundler and the contributions bundled in Sections 1-4. For additional bundlers, click "Add Another Bundler Page" below.

<b>1</b>  <b>BUNDLER NAME</b>	<table> <tr> <td>Bundler Title</td> <td>Bundler First Name</td> </tr> <tr> <td></td> <td>Jed</td> </tr> <tr> <td>Bundler Last Name</td> <td>Bundler Suffix</td> </tr> <tr> <td>Buie</td> <td></td> </tr> </table>	Bundler Title	Bundler First Name		Jed	Bundler Last Name	Bundler Suffix	Buie																	
Bundler Title	Bundler First Name																								
	Jed																								
Bundler Last Name	Bundler Suffix																								
Buie																									
<b>2</b>  <b>BUNDLER ADDRESS</b>	<table> <tr> <td>Bundler Address/ PO Box</td> <td colspan="3">Bundler Apartment or Suite Number</td> </tr> <tr> <td>2901 Bee Caves Road</td> <td colspan="3"># D</td> </tr> <tr> <td>Bundler City</td> <td>Bundler State</td> <td colspan="2">Bundler Zip Code</td> </tr> <tr> <td>Austin</td> <td>TX</td> <td colspan="2">78746</td> </tr> <tr> <td>Bundler Employer</td> <td colspan="3">Bundler Occupation</td> </tr> <tr> <td>Buie &amp; Company</td> <td colspan="3">Public Relations</td> </tr> </table>	Bundler Address/ PO Box	Bundler Apartment or Suite Number			2901 Bee Caves Road	# D			Bundler City	Bundler State	Bundler Zip Code		Austin	TX	78746		Bundler Employer	Bundler Occupation			Buie & Company	Public Relations		
Bundler Address/ PO Box	Bundler Apartment or Suite Number																								
2901 Bee Caves Road	# D																								
Bundler City	Bundler State	Bundler Zip Code																							
Austin	TX	78746																							
Bundler Employer	Bundler Occupation																								
Buie & Company	Public Relations																								
<b>3</b>  <b>AMOUNT BUNDLED</b>	<table> <tr> <td>(\$) Total Amount Bundled</td> </tr> <tr> <td>\$8,050.00</td> </tr> </table>	(\$) Total Amount Bundled	\$8,050.00																						
(\$) Total Amount Bundled																									
\$8,050.00																									

## 4 Itemize each contribution bundled by the bundler listed above

Contributor Last Name	Contributor First Name	Contributor Employer and Occupation	Contribution Amount (\$)	Contribution Date (yyyymmdd)	Appears on Schedule
Kelsy	Douglas	Requested	\$350.00	20161006	A1
Kelsy	Ellen	Requested	\$350.00	20161006	A1
Gallagher	Gary	Entegns/Vice President	\$350.00	20161006	A1
Gallagher	Belinda	NA/Homemaker	\$350.00	20161006	A1
Jacobson	Benjamin	NA/Self Employed	\$350.00	20161006	A1
Jacobson	Janine	NA/Self Employed	\$350.00	20161006	A1
Garber	Ross	Requested	\$350.00	20161007	A1
Garber	Laurie	Requested	\$350.00	20161007	A1
Burgess	Kevin	McKool Smith/Attorney	\$350.00	20161006	A1
Burgess	Erin	NA/Homemaker	\$350.00	20161006	A1
Garber	Scott	Requested	\$350.00	20161003	A1
Garber	Requested	Requested	\$350.00	20161003	A1
Salomon	Bruce	Elberon, LLC/Finance	\$350.00	20161006	A1
Salomon	Linda	NA/ Homemaker	\$350.00	20161006	A1
Rhodus	David	Requested	\$350.00	20161004	A1

Add Another Bundler Page



# Candidate Bundling Report: Schedule ATX.5

Attach to C/OH Coversheet

List each individual bundler and the contributions bundled in Sections 1-4. For additional bundlers, click "Add Another Bundler Page" below.

<b>1</b>  <b>BUNDLER NAME</b>	Bundler Title      Bundler First Name <input type="text"/> <input type="text"/> Bundler Last Name      Bundler Suffix <input type="text"/> <input type="text"/>
<b>2</b>  <b>BUNDLER ADDRESS</b>	Bundler Address/ PO Box      Bundler Apartment or Suite Number <input type="text"/> <input type="text"/> Bundler City      Bundler State      Bundler Zip Code <input type="text"/> <input type="text"/> <input type="text"/> Bundler Employer      Bundler Occupation <input type="text"/> <input type="text"/>
<b>3</b>  <b>AMOUNT BUNDLED</b>	(\$) Total Amount Bundled <input type="text"/>

## 4 Itemize each contribution bundled by the bundler listed above

Contributor Last Name	Contributor First Name	Contributor Employer and Occupation	Contribution Amount (\$)	Contribution Date (yyyymmdd)	Appears on Schedule
Rodrigues	Jose J.	Requested	\$350.00	20161007	A1
Gomez	Arthur A.	Requested	\$350.00	20161006	A1
Schmitt	Sandra	Edgenuity/UCB Designer	\$350.00	20161006	A1
Copland	Ross W.	Requested	\$350.00	20161010	A1
Schmitt	Karla	Requested	\$350.00	20161006	A1
Belofsky	Virginia	Requested	\$350.00	20161006	A1
Garber	Ross	Requested	\$175.00	20161008	A1
Garber	Hailey	Requested	\$175.00	20161008	A1
Garber	Harrison	Requested	\$350.00	20161008	A1
					A1

Add Another Bundler Page