

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC
COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 11
3 COMMITTEE NAME Honest Transportation Solutions		OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date imaged	
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 10001 Jupiter Hills Dr. Austin, TX 78747-1213		2016 08 31 PM 3 56 AUSTIN CITY CLERK RECEIVED	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI KATHY M. NICKNAME LAST SUFFIX Pillmore		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 10001 Jupiter Hills Dr., Austin, TX 78747		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Same		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION 512-797-5400		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 Limit <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year 09/30/2016 THROUGH 10/29/2016		
11 ELECTION	ELECTION DATE Month Day Year 11/08/2016 ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Runoff <input type="checkbox"/> Special <input type="checkbox"/> Other		

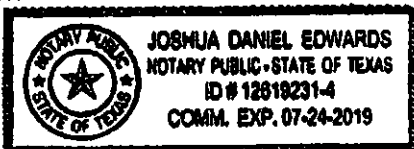
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SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME Honest Transportation Solutions		13 Filer ID	
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input type="checkbox"/> SUPPORT (Candidate or Measure) <input checked="" type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate <input type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)	
		<input checked="" type="checkbox"/> Measure	BALLOT IDENTIFICATION / # Prop 1
		DESCRIPTION City of Austin Proposition 1 Transportation bonds	
15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 105,800.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 74,904.91
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 29,887.79
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00

16 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Kathleen D. Edwards
Signature of Campaign Treasurer

Sworn to and subscribed before me, by the said KATHLEEN D. EDWARDS, this the 31TH day of OCT, 20 16, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

JOSHUA D. EDWARDS
Printed name of officer administering oath

SM
Title of officer administering oath

SUBTOTALS - SPAC

FORM **SPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME Honest Transportation Solutions		18 Filer ID
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 104,500.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 1,300.00
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 74,904.91
9.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
14.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/11
2 FILER NAME Honest Transportation Solutions		3 Filer ID
4 Date 10/05/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Dick	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code 106 Wood Trail Austin, TX 78746	
8 Principal occupation / Job title (See Instructions) lobbyist		9 Employer (See Instructions) Retired
Date 10/28/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrow, Janis	Amount of Contribution (\$) \$20,000.00
	Contributor address; City; State; Zip Code 5515 Balcones Dr. Austin, TX 78731	
Principal occupation / Job title (See Instructions) Invesments		Employer (See Instructions) Self
Date 10/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dhanis, LLC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code P. O. Box 50202 Austin, TX 78763-0202	
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#: _____) Flanagan, Karen	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 12301 Bar X Dr Austin, TX 78727	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self
Date 10/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston, Ora	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 2207 E. 22nd St. Austin, TX 78722	
Principal occupation / Job title (See Instructions) Council Member		Employer (See Instructions) City of Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/11
2 FILER NAME Honest Transportation Solutions		3 Filer ID
4 Date 10/09/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maier, Richard N. <hr/> 6 Contributor address; City; State; Zip Code 704 East 45-1/2 St Austin, TX 78751	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Homebuilder		9 Employer (See Instructions) Lennar Homes
Date 10/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKay, Thomas <hr/> Contributor address; City; State; Zip Code 11339 Taylor Draper Ln Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Machinist		Employer (See Instructions) Toms Way Inc
Date 10/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Adelaide <hr/> Contributor address; City; State; Zip Code 2602 Woodmont Ave Austin, TX 78703	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) M&B Investments
Date 10/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ring, Harvey <hr/> Contributor address; City; State; Zip Code 66 Pascal Lane Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Retired
Date 09/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandefer, Jeff D. <hr/> Contributor address; City; State; Zip Code 1606 Niles Rd Austin, TX 78703	Amount of Contribution (\$) \$25,000.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 3/3 Rpt: 6/11

2 FILER NAME

Honest Transportation Solutions

3 Filer ID

4 Date
09/30/2016

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Shive, James

7 Amount of Contribution (\$)

\$100.00

6 Contributor address; City; State; Zip Code

6505 Auburndale St

Austin, TX 78723-2701

8 Principal occupation / Job title (See Instructions)

Archivist

9 Employer (See Instructions)

State of Texas

Date
10/11/2016

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Skaggs, James B and Betty

Amount of Contribution (\$)

\$25,000.00

Contributor address; City; State; Zip Code

4700 Toreador

Austin, TX 78746

Principal occupation / Job title (See Instructions)

Executive

Employer (See Instructions)

Retired

Date
10/26/2016

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Skaggs, James B and Betty

Amount of Contribution (\$)

\$25,000.00

Contributor address; City; State; Zip Code

4700 Toreador

Austin, TX 78746

Principal occupation / Job title (See Instructions)

Executive

Employer (See Instructions)

Retired

Date
09/30/2016

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Welp, Mark

Amount of Contribution (\$)

\$1,000.00

Contributor address; City; State; Zip Code

7108 Barefoot Cove

Austin, TX 78730

Principal occupation / Job title (See Instructions)

investments

Employer (See Instructions)

Self

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule C1:
Sch: 1/1 Rpt: 7/11

2 FILER NAME

Honest Transportation Solutions

3 Filer ID

4 Date

10/27/2016

5 Corporation / Labor Organization name

Lube Pit Stop Fleet Service

7 Amount of contribution (\$)

\$300.00

6 Corporation / Labor Organization address; City; State; Zip Code

2223 So. Lamar Blvd

Austin, TX 78704

Date

10/27/2016

Corporation / Labor Organization name

Matt's El Rancho

Amount of contribution (\$)

\$1,000.00

Corporation / Labor Organization address; City; State; Zip Code

P. O. Box 3218

Austin, TX 78764

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/4 Rpt: 8/11	2 FILER NAME Honest Transportation Solutions	3 Filer ID
4 Date 10/04/2016	5 Payee name AMPRO Productions	
6 Amount (\$) \$6,590.00	7 Payee address; City; State; Zip Code 7202 Smokey Hill Rd. Austin, TX 78736	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign fabrication
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 10/04/2016	Candidate/Officeholder name AMPRO Productions	Office sought Office held
Amount (\$) \$5,615.00	Payee address; City; State; Zip Code 7202 Smokey Hill Rd. Austin, TX 78736	
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 Sign fabrication
Complete ONLY if direct expenditure to benefit C/OH		
Date 10/07/2016	Candidate/Officeholder name Coyle, Joan	Office sought Office held
Amount (\$) \$231.00	Payee address; City; State; Zip Code 10001 So. First, Apt. 614 Austin, TX 78748	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Deliveries
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.

1 Total pages Schedule F1: Sch: 2/4 Rpt: 9/11	2 FILER NAME Honest Transportation Solutions	3 Filer ID
4 Date 10/16/2016	5 Payee name Coyle, Joan	
6 Amount (\$) \$112.00	7 Payee address; City; State; Zip Code 10001 So. First, Apt. 614 Austin, TX 78748	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Deliveries
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 10/04/2016	Candidate/Officeholder name Goforth, Beau	Office sought Office held
Amount (\$) \$342.00	Payee address; City; State; Zip Code 10901 Olympia Fields Loop Austin, TX 78747	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Deliveries
Complete ONLY if direct expenditure to benefit C/OH		
Date 10/06/2016	Candidate/Officeholder name KC Strategies	Office sought Office held
Amount (\$) \$1,950.00	Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website development
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.

1 Total pages Schedule F1: Sch: 3/4 Rpt: 10/11	2 FILER NAME Honest Transportation Solutions	3 Filer ID
4 Date 10/14/2016	5 Payee name KC Strategies	
6 Amount (\$) \$54,505.00	7 Payee address; City; State; Zip Code 3571 Far West Blvd. Austin, TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Media Placement
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 10/05/2016	Candidate/Officeholder name Payee name Pillmore, Kathy	Office sought Office held
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 10001 Jupiter Hills Dr. Austin, TX 78747-1213	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consultant
Complete ONLY if direct expenditure to benefit C/OH		
Date 10/05/2016	Candidate/Officeholder name Payee name Pillmore, Kathy	Office sought Office held
Amount (\$) \$235.16	Payee address; City; State; Zip Code 10001 Jupiter Hills Dr. Austin, TX 78747-1213	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for office supplies
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.

1 Total pages Schedule F1: Sch: 4/4 Rpt: 11/11	2 FILER NAME Honest Transportation Solutions	3 Filer ID
4 Date 10/27/2016	5 Payee name Printing Solutions	
6 Amount (\$) \$324.75	7 Payee address; City; State; Zip Code 2301 S. Congress Ave., Ste 20 Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labels
9 Complete ONLY if direct expenditure to benefit C/OH		
Candidate/Officeholder name	Office sought	Office held