SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT	FORM SPAC COVER SHEET PG 1		
The SPAC Instruction Guide explains how to complete this form.  1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: 5		
3 COMMITTEE NAME	OFFICE UE ONLY >		
Sensible Transportation Solutions for Austin	Date Received S S R R		
4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY, STATE; ZIP CODE  ADDRESS Post Office Box 146, Austin, TX 78767	Date Hand-delivered or Poslmarked Receipt # Amodnt		
5 CAMPAIGN MS/MRS/MR FIRST MI TREASURER NAME Mr. Michael R. Levy	Date Processed		
NICKNAME LAST SUFFIX	Date Imaged		
6 CAMPAIGN TREASURER'S STREET ADDRESS (residence or business)  STREET ADDRESS, (NO PO BOX PLEASE): APT / SUITE #: CITY; STATE;  515 Congress, Suite 2375, Austin, TX 78701	ZIP CODE		
7 CAMPAIGN TREASURER'S MAILING ADDRESS  Change of address  STREET OR PO BOX;  APT / SUITE #: CITY; STATE;	ZIP CODE		
8 CAMPAIGN TREASURER PHONE NUMBER EXTENSION (512 ) 450-5100			
9 REPORT TYPE  January 15  July 15  8th day before election  Runoff	Exceeded \$500 limit Dissolution (attach PAC-DR)  10th day after campaign treasurer termination		
10 PERIOD COVERED  Month Day Year  10 / 30 / 2016 THROUGH	Month Day Year  11 / 3 / 2016		
11 ELECTION  ELECTION DATE Month Day Year  11 8 2016  Primary Runoff	X General Special		
GO TO PAGE 2			

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

# FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME Sensible Trans	ACCOUNT # (Ethics Commission Filers)			
13 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME	,,,	
(Attach lists on plain paper to complete this report if necessary.)	CANDIDATE			
SUPPORT (Candidate or Measure)	OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (off	iceholder)	
OPPOSE (Candidate or Measure)				
(Candidate of Measure)	□ usacups	Proposition 1 11,	/ / /	
ASSIST (Officeholder)	MEASURE	2016 City of Austin Mobility Bo	ond Package	
14 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		1.3%	
:	TOTAL POLITICAL CONTRIBUTIONS     (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 15,270.00	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		MIZED \$ 0	
	4. TOTAL POLITICAL EXPENDITURES		\$ 0	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		T DAY \$ 0	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 29,003.56	
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.  PAM ELISE KELLER My Commission Expires December 23, 2018  Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE				
Sworn to and subscribed before me, by the said				
day of	1000	m Elise Keller	Notary Public	
Signature of officer administer	100 C	name of officer administering oath	Title of officer administering oath	

## **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS

### SCHEDULE A

The	Instruction Guide explains how to complete this	s form.	1 Total pages Sch	nedule A:
2 FILER NAME			3 ACCOUNT # (E	thics Commission Filers)
Sensible Tra	nsportation Solutions for Austin			
4 Date	5 Full name of contributor out-of-state PAC (ID#:	}	7 Amount of	8 In-kind contribution
	Macho Marketing	,	contribution (\$)	description (if applicable)
11/3/2016			\$12,470.00	newspaper advertising
	6 Contributor address; City; State; Zip Code		Ψ12,470.00	newspaper advertising
	3412 Bonnie Road, Austin, TX 78703			[
			(If travel outside	of Texas, complete Schedule T)
9 Principal occu Marketing	pation / Job title (See Instructions)	10 Employer (See In Macho Marketin	istructions)	
Iviaiketing		Macilo Marketii	ıy	<u> </u>
Date	Full name of contributor 🔲 out-of-state PAC (ID#:	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/31/2016	Dhanis, LLC		ασγιατέματο τη (ψ)	
10/31/2016	Contributor address; City; State; Zip Code		\$1,000.00	
	Post Office Box 50202, Austin, TX 7876	3		
			(If here all autoids	of Towns assessed to Cohool to Th
Principal occur	pation / Job title (See Instructions)	Employer(See In	1	of Texas, complete Schedule T)
Investments Dhanis, LLC				
Date	Full name of contributor	)	Amount of	In-kind contribution
	Richard Maier  11/1/2016 Contributor address; City; State; Zip Code		contribution (\$)	description (if applicable)
11/1/2016			\$1,000.00	1
	704 East 45 1/2 Street, Austin, TX 7875	1	ψ1,000.00	
	704 Edst 45 1/2 Ottoot, /tdstill, 1/1 /010	1	-	
				of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Homebuilder				
Date	Full name of contributor   out-of-state PAC (ID#:	)	Amount of	In-kind contribution
	Bill and Rhonda Paver		contribution (\$)	description (if applicable)
11/1/2016			\$300.00	
	Contributor address; City; State; Zip Code	4	\$300.00	' 
	4613 Ridge Oak Drive, Austin, TX 7873	1		' 
			(If travel outside	of Texas, complete Schedule T)
	pation / Job title (See Instructions) administration	Employer (See In Stepping Stone		
Date	Full name of contributor 🔲 out-of-state PAC (ID#:	)	Amount of	In-kind contribution
14/0/40	Development 2000, Inc.		contribution (\$)	description (if applicable)
11/2/16	Contributor address; City; State; Zip Code		\$500.00	l
	510 West 15th Street, Austin, TX 78701			l
	TO West Tour Guest, Austin, 17, 70701			1
			· · · · · · · · · · · · · · · · · · ·	of Texas, complete Schedule T)
Principal occup Commercia	pation / Job tille (See Instructions) Il real estate	Development 200	structions) 10, Inc.	

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS			SCHEDULE <b>E</b>
The	Instruction Guide explains how to comp	lete this form.	Total pages Schedule E: 2
2 FILER NAME Sensible Tran	sportation Solutions for Austin	3	ACCOUNT # (Ethics Commission Filers)
4 ТОТА	L OF UNITEMIZED LOANS:	) ) ) ) ) )	\$
5 Date of loan 11/3/2016	7 Name of lender  Michael R. Levy	out-of-state PAC (ID#:	9 Loan Amount (\$) \$1,846.50
6 Is lender a financial	8 Lender address; City; State;	10 Interest rate	
Institution?	Post Office Box 146, Austin, TX 78767		11 Maturity date
12 Principal occupati retired	on / Job title (See Instructions)	13 Employer (See Instructions) retired	
14 Description of Coll  X none	ateral		
15 GUARANTOR INFORMATION	16 Name of guarantor		18 Amount Guaranteed (\$)
not applicable	17 Guarantor address: City: 5	State; Zip Code	
19 Principal Occupat	ion (See Instructions)	20 Employer (See Instructions)	
Date of loan	Name of lender	out-of-state PAC (ID#:	) Loan Amount (\$)
11/3/2016	Michael R. Levy		\$500.00
Is lender a financial	Lender address; City; State; Zip Code		Interest rate
Institution?	Post Office Box 146, Austin, TX	78767	Maturity date
Principal occupati retired	Lon / Job title (See Instructions)	Employer (See Instructions) retired	1
Description of Colla	oteral		
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
not applicable	Guarantor address; City; S	State; Zip Code	
Principal Occupati	ion (See Instructions)	Employer (See Instructions)	1
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.			

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LOANS				SCHEDULE <b>E</b>
The Instruction Guide explains how to complete this form.		ages Schedule E:		
2 FILER NAME Sensible Trans	portation Solutions for Austin		3 ACCOL	INT # (Ethics Commission Filers)
TOTA	L OF UNITEMIZED LOANS:	⇒	ರು	\$
5 Date of loan 11/3/2016	7 Name of lender  Michael R. Levy	out-of-state PAC (ID#:		9 Loan Amount (\$) 27.06
6 Is lender a financial Institution?	8 Lender address; City; State; Post Office Box 146, Austin, TX 78	Zip Code		10 Interest rate
Y (N)	Tost Office box 140, Austin, 1276	57-07		11 Maturity date
12 Principal occupation retired	on / Job title (See Instructions)	13 Employer (See Instructions) retired		
14 Description of Coll  in name	ateral			
15 GUARANTOR INFORMATION	16 Name of guarantor			18 Amount Guaranteed (\$)
not applicable	17 Guarantor address; City;	State; Zip Code	, , .	
19 Principal Occupati	on (See Instructions)	20 Employer (See Instructions)		
Date of loan	Name of lender	cut-of-state PAC (ID#:	)	Loan Amount (\$)
Is lender a financial Institution?	Lender address; City; State;	Zip Code		Interest rate
Y N				Maturity date
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)		
Description of Colla	iteral			
GUARANTOR INFORMATION	Name of guarantor			Amount Guaranteed (\$)
not applicable	Guarantor address; City;	State; Zip Code		
Principal Occupati	on (See Instructions)	Employer (See Instructions)		
If lend	ATTACH ADDITIONAL COPI	LES OF THIS SCHEDULE AS NEE		quirements.