

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed:		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME		MS / MRS / MR FIRST MI			
NICKNAME LAST SUFFIX		Sheri Gallo		2016 DEC 7 PM 4:48 AUSTIN CITY CLERK RECEIVED	
4 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input type="checkbox"/> Final report <input type="checkbox"/> Other (specify) _____			
5 ORIGINAL PERIOD COVERED		Month Day Year 10 / 30 / 2016 THROUGH 12 / 03 / 2016		Receipt #	
				Date Processed	
				Date Imaged	

6 EXPLANATION OF CORRECTION
 Added Treasurer's name, address, & phone number. Added 48 new Schedule A1 entries. Added the amount to Line 5 on page 2 of the cover sheet. Corrected three A1 schedule entries.

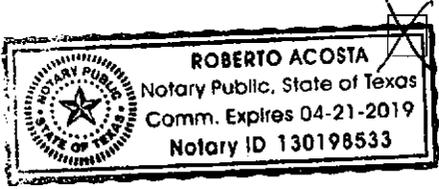
7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.



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 7th day of DECEMBER, 2016, to certify which, witness my hand and seal of office.

Roberto Acosta

Signature of officer administering oath

ROBERTO ACOSTA

Printed name of officer administering oath

NOTARY PUBLIC

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

All Reports: A filer who files a corrected report must submit a correction affidavit. The affidavit must identify the information that has changed.

Reports filed with Texas Ethics Commission: A corrected report (other than a report due 8 days before an election or a special report near election) filed with the Ethics Commission after its due date is not considered late for purposes of late-filing penalties if: (1) any error or omission in the report as originally filed was made in good faith, and (2) the person filing the report files a corrected report and a good-faith affidavit not later than the 14th business day after the date the person learns that the report as originally filed is inaccurate or incomplete.

Semiannual Reports: Effective September 1, 2011, a semiannual report (due January 15 or July 15) that is amended/corrected before the eighth day after the original report was filed is considered to have been filed on the date the original report was filed. A semiannual report that is amended/corrected on or after the eighth day after the original report was filed is considered to have been filed on the date the original report was filed if: (1) the amendment/correction is made before any complaint is filed with regard to the subject of the amendment/correction; and (2) the original report was made in good faith and without intent to mislead or misrepresent the information contained in the report.

Attach additional pages as necessary.

INSTRUCTIONS FOR COMPLETING THIS FORM

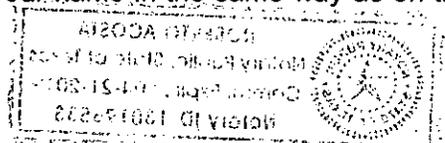
The following numbers correspond to the numbered boxes on the other side.

1. Filer ID. If you file with the Ethics Commission, you should have received a letter acknowledging receipt of your campaign treasurer appointment and assigning you a Filer ID. Put that number in this box. If you do not file with the Ethics Commission, skip this box.

2. Total Pages Filed. After completing this form and any attachments, count the number of pages. Enter that number in this box. Each side of a two-sided form counts as a page. In other words, this form is two pages.

3. Candidate/Officeholder Name. Put your full name here. Enter your name in the same way as on the report you are correcting.

4. Original Report Type. Mark the type of report you are correcting.



5. Original Period Covered. Enter the period covered by the report you are correcting. The year is important because filers sometimes correct reports years after filing the original.

6. Explanation of Correction. Attach any part of the campaign finance report form needed to report and explain corrections. Explain why there was an error on the original report. Also explain what information is being corrected and how the new information is different from the information on the original report. (Use additional pages if you need more space.) You may also use this area to request a waiver or reduction of a late-filing penalty and state the basis of your request.

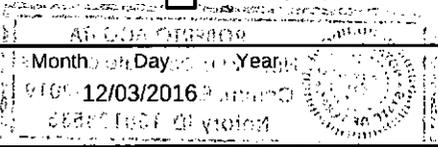
7. Affidavit. Read the affidavit before signing. You must sign the affidavit in the presence of an individual authorized to take oaths. If signed before a notary public, the affidavit must include the notary's signature and seal.

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: 13
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	Sheri		
	NICKNAME	LAST	SUFFIX
	Gallo		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	PO Box 26550		
	Austin, TX 78755		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
		PM	
	Date Processed		
			4 48
	Date Imaged		8
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input 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
	10/30	2016	THROUGH
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
	12/13	2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other <input 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

AUSTIN CITY CLERK RECEIVED
2016 DEC 7 PM 4 48



GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

2 of 13

13 C / OH NAME Gallo, Sheri	14 Filer ID
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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.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
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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)	\$ 7,800.00 69,728.14
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 71,152.39 71,152.39
	4. TOTAL POLITICAL EXPENDITURES	\$ 71,152.39
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 32,328.56
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 7TH day of DECEMBER, 2016, to certify which, witness my hand and seal of office.

Rob Acosta
Signature of officer administering

ROBERTO ACOSTA
Printed name of officer administering

NOTARY PUBLIC
Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Gallo, Sheri	19 Filer ID
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,800.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
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	\$ 71,152.39
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/10 Rpt: 4/13
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 11/10/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, George	7 Amount of Contribution (\$) \$350.00
6 Contributor address; City; State; Zip Code c/o Austin Trust Company 336 S Congress Avenue Suite 100 Austin, TX 78704		
8 Principal occupation / Job title (See Instructions) Requested		9 Employer (See Instructions) Requested
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyt, Jefferson	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 5423 Shoalwood Ave. Austin, TX 78756		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/22/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braha, Jacques	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 28 Tilbury Ln. San Antonio, TX 78230		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brinkley, Donna	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 53 Lost Meadow Trail Austin, TX 78738		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brinkley, Jeff	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 53 Lost Meadow Trail Austin, TX 78738		
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: 2/10 Rpt: 5/13
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 11/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, John	7 Amount of Contribution (\$) \$350.00
	6 Contributor address; City; State; Zip Code 615 W 7th Apt. 1302 Austin, TX 78701	
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self Employed
Date 11/22/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Aan	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 9890 Silver Mountain Dr. Austin, TX 78737	
Principal occupation / Job title (See Instructions) Landscape Architect		Employer (See Instructions) Coleman & Assoc.
Date 11/28/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Kent	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 2510 El Greco Cv. Austin, TX 78703	
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Centro Development LLC
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diepenbrock, Dani	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code 2111 Melridge Pl Austin, TX 78704	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diepenbrock, Ryan	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code 2111 Melridge Pl Austin, TX 78704	
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: 3/10 Rpt: 6/13
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 11/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ghandour, Rana	7 Amount of Contribution (\$) \$175.00
6 Contributor address; City; State; Zip Code 8307 Hickory Creek Dr. Austin, TX 78735		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giles, Casey	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 5103 Split Cedar Cv. Austin, TX 78735		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giles, Tiffany	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 5103 Split Cedar Cv. Austin, TX 78735		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/28/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glasco, Alice	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 5117 Valburn Ct. Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haddad, Salim	Amount of Contribution (\$) \$175.00
Contributor address; City; State; Zip Code 8307 Hickory Creek Dr. Austin, TX 78735		
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: 4/10 Rpt: 7/13
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 11/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Jerry & Sharon	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 111 Congress Ave. Suite 1400 Austin, TX 78701		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/22/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hausmann, Michele	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 28 Tilbury Ln. San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Land Use Solutions, LLC
Date 11/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutto, Katherine	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2607 Trail of the Madrones Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Ashley	Amount of Contribution (\$) \$350.00
Contributor address; City; State; Zip Code 2226 Westlake Dr. # 1 Unit 2 Austin, TX 78746		
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Dell Children's Medical Center
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreisle, Matthew	Amount of Contribution (\$) \$175.00
Contributor address; City; State; Zip Code 1512 Hardovin Ave 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: 5/10 Rpt: 8/13
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 11/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreisle, Rita	7 Amount of Contribution (\$) \$175.00
	6 Contributor address; City; State; Zip Code 1512 Hardovin Ave Austin, TX 78703	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Jimmy Nassour	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 3839 Bee Caves Rd. Suite 200 West Lake Hills, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lulic, Nada	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 5423 Shoalwood Ave. Austin, TX 78756	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/28/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCalla, Dudley Davis	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 2804 Scenic Dr. Austin, TX 78703	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jackson Walker, LLP
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meisler, Paul	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 6 Coleridge Ln. Austin, TX 78746	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Pioneer Real Estate Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/10 Rpt: 9/13
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 11/29/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mok, Aloysius	7 Amount of Contribution (\$) \$175.00
6 Contributor address; City; State; Zip Code 6301 Cat Mountain Cv. Austin, TX 78731		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mok, Amy	Amount of Contribution (\$) \$175.00
Contributor address; City; State; Zip Code 6301 Cat Mountain Cv. Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Money, Kelly	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code PO Box 1731 Cedar Park, TX 78630		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Money, Thomas	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code PO Box 1731 Cedar Park, TX 78630		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muskin, Alan	Amount of Contribution (\$) \$350.00
Contributor address; City; State; Zip Code 4009 Knollwood Dr. Austin, TX 78731		
Principal occupation / Job title (See Instructions) Home Builder		Employer (See Instructions) The Muskin Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/10 Rpt: 10/13
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 12/01/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muskin, Ellen	7 Amount of Contribution (\$) \$350.00
6 Contributor address; City; State; Zip Code 4009 Knollwood Dr. Austin, TX 78731		
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Muskin Commercial
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman, Janet	Amount of Contribution (\$) \$175.00
Contributor address; City; State; Zip Code 8501 Chalk Knoll Dr. Austin, TX 78735		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman, Paul	Amount of Contribution (\$) \$175.00
Contributor address; City; State; Zip Code 8501 Chalk Knoll Dr. Austin, TX 78735		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padavic, Kristen	Amount of Contribution (\$) \$125.00
Contributor address; City; State; Zip Code 4111 Spicewood Springs Rd. Unit 6 Austin, TX 78759		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padavic, Michael	Amount of Contribution (\$) \$125.00
Contributor address; City; State; Zip Code 4111 Spicewood Springs Rd. Unit 6 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: 8/10 Rpt: 11/13
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 11/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peoples, Wesley	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 7511 Fireoak Dr. Austin, TX 78759		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Wes Peoples' Homes
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Christian	Amount of Contribution (\$) \$350.00
Contributor address; City; State; Zip Code 4105 Benedict Ln. Austin, TX 78746		
Principal occupation / Job title (See Instructions) Home Builder		Employer (See Instructions) Rivendale Homes
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ragssdale, Mary	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 4308 Shoalwood Austin, TX 78756		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ragssdale, Milton	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 4308 Shoalwood Austin, TX 78756		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Colleen	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 505 Red Corral Ranch Rd Wimberly, TX 78676		
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: 9/10 Rpt: 12/13
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 11/29/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, James	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 505 Red Corral Ranch Rd Wimberly, TX 78676		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, Mitch	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 106 Melody Lakeway, TX 78734		
Principal occupation / Job title (See Instructions) Home Builder		Employer (See Instructions) Schwartz Custom Homes
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trent, Betty	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2822A Wooldridge Dr. Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Angela	Amount of Contribution (\$) \$175.00
Contributor address; City; State; Zip Code 1409 W 6th St. Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Scott	Amount of Contribution (\$) \$175.00
Contributor address; City; State; Zip Code 1409 W 6th St. 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: 10/10 Rpt: 13/13
2 FILER NAME Gallo, Sheri		3 Filer ID
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