

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID	<b>2</b> Total pages filed: 21
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Alison	MI
	NICKNAME	LAST Alter	SUFFIX
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 4401 Bellvue Ave  Austin, TX 78756		Date Received <b>2017 JAN 17 PM 11 25</b> RECEIVED AUSTIN CITY CLERK
			Date Hand-delivered or Date Postmarked
			Receipt #
			Date Processed
		Date Imaged	
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST August	MI W
	NICKNAME	LAST Happy	SUFFIX Harris III
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1901 West 35th Street Austin TX 78703		
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 320-8808	EXTENSION
<b>8</b> REPORT TYPE	<input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
<b>9</b> PERIOD COVERED	Month Day Year      Month Day Year 12/04/2016      THROUGH      12/31/2016		
<b>10</b> ELECTION	ELECTION DATE Month Day Year 12/13/2016		ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
	<b>11</b> OFFICE OFFICE HELD (if any)		<b>12</b> OFFICE SOUGHT (if known) Austin City Council, District 10

**GO TO PAGE 2**



**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Alter, Alison	<b>19 Filer ID</b>
---------------------------------------	--------------------

<b>20 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
<b>NAME OF SCHEDULE</b>		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,290.00
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	\$ 84,359.85
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 7,500.00
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 52.18
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: 1/9 Rpt: 4/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/05/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashworth, Karen	<b>7</b> Amount of Contribution (\$)  \$250.00
	<b>6</b> Contributor address; City; State; Zip Code 4202 Tallowood Dr  Austin, TX 78731	
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Saunders Norval Pargaman & Atkins
<b>Date</b> 12/09/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Environmental Democrats	<b>Amount of Contribution (\$)</b>  \$100.00
	<b>Contributor address; City; State; Zip Code</b> 604 West 11th St.  Austin, TX 78701	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/07/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Barkley, John	<b>Amount of Contribution (\$)</b>  \$250.00
	<b>Contributor address; City; State; Zip Code</b> 3118 Wheeler  Austin, TX 78705	
<b>Principal occupation / Job title (See Instructions)</b> real estate		<b>Employer (See Instructions)</b> self
<b>Date</b> 12/09/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonilla, Eric	<b>Amount of Contribution (\$)</b>  \$50.00
	<b>Contributor address; City; State; Zip Code</b> 803 Dawson  Austin, TX 78704	
<b>Principal occupation / Job title (See Instructions)</b> Analyst		<b>Employer (See Instructions)</b>
<b>Date</b> 12/09/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornstein, Sue	<b>Amount of Contribution (\$)</b>  \$350.00
	<b>Contributor address; City; State; Zip Code</b> 3111 Beverly Dr.  Dallas, TX 75205	
<b>Principal occupation / Job title (See Instructions)</b> Texas Medical Home Initiative		<b>Employer (See Instructions)</b> Executive Director

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/9 Rpt: 5/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/06/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Sabrina	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>6</b> Contributor address; City; State; Zip Code 1900 W 40th St  Austin, TX 78731		
<b>8</b> Principal occupation / Job title (See Instructions) Marketing		<b>9</b> Employer (See Instructions) Dell
Date 12/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eaton, David	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 3702 Hidden Hollow  Austin, TX 78731		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas
Date 12/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ekerdt, Carol	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 7432 Anaqua Dr.  Austin, TX 78750		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 12/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott Naishtat Campaign	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 6401 Wilbur Dr.  Austin, TX 78757		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erwin, Gay	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code Barton Oaks Plaza One 901 S. MoPac Expressway, Suite 100 Austin, TX 78746		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Strategic Partnerships 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: 3/9 Rpt: 6/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/04/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Folberg, Steven	<b>7</b> Amount of Contribution (\$)  \$25.00
	<b>6</b> Contributor address; City; State; Zip Code 4516 Sinclair Avenue  Austin, TX 78756	
<b>8</b> Principal occupation / Job title (See Instructions) Rabbi		<b>9</b> Employer (See Instructions) Congregation Beth Israel
Date 12/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forbath, Willy	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code 3206 Greenlee Dr.  Austin, TX 78703	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) The University of Texas
Date 12/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert, Lizan	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code 4212 Bellvue Ave  Austin, TX 78756	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Guy F. Atkinson Construction
Date 12/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haddad, Michelle	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code 4707 Highland Terrace  Austin, TX 78731	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 12/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardin, Kathy	Amount of Contribution (\$)  \$20.00
	Contributor address; City; State; Zip Code 9501 Rolling Oaks Trail  Austin, TX 78750	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Travis County

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/9 Rpt: 7/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/08/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric  <b>6</b> Contributor address; City; State; Zip Code 2114 Indian Trail  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> 12/04/2016	<b>Full name of contributor</b> <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00027342) IBEW PAC Voluntary Fund  <b>Contributor address; City; State; Zip Code</b> 900 Seventh Street, N.W.  Washington, DC 20001	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Jennifer  <b>Contributor address; City; State; Zip Code</b> 7705 Waldon Dr.  Austin, TX 78750	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> none
<b>Date</b> 12/12/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Keene, Russell  <b>Contributor address; City; State; Zip Code</b> 2600 Maria Anna Rd  Austin, TX 78703	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> Consulting		<b>Employer (See Instructions)</b> Crossnore Group LLC
<b>Date</b> 12/09/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Zuhair  <b>Contributor address; City; State; Zip Code</b> 1904 Spruce Street 3F Philadelphia, PA 19103	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Student		<b>Employer (See Instructions)</b> MBA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/9 Rpt: 8/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/05/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehman, Chris <b>6</b> Contributor address; City; State; Zip Code 1914 Larchmont Dr.  Austin, TX 78704	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>8</b> Principal occupation / Job title (See Instructions) Appraiser		<b>9</b> Employer (See Instructions) Self
Date 12/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Kevin Contributor address; City; State; Zip Code 1002 Bouldin Ave.  Austin, TX 78704	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Buyer		Employer (See Instructions) Whole Earth Provision Co.
Date 12/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lomas, Rachel Contributor address; City; State; Zip Code 212 West 33rd St  Austin, TX 78705	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions) Entrepreneur
Date 12/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahler, Barbara Contributor address; City; State; Zip Code 4502 Avenue G  Austin, TX 78751	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Hydrologist		Employer (See Instructions)
Date 12/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcus, Richard Contributor address; City; State; Zip Code 913 Terrace Mountain Drive  Austin, TX 78746	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Senior Advisor		Employer (See Instructions) Peter J Solomon Company

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/9 Rpt: 9/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/08/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathis, Mary Nell	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>6</b> Contributor address; City; State; Zip Code 6300 Mercedes Bend  Austin, TX 78759		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Phil & Sue	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 2703 Stratford Drive  Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meltzer, Linda	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 6334 Yaupon Drive  Austin, TX 78759		
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) TPCIGA
Date 12/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Midwest Region Laborers' PAC	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 1 N. Old State Capitol Plaza Ste. 525 Springfield, IL 62701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Hillary	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 6012 Marquesa Dr.  Austin, TX 78731		
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: 7/9 Rpt: 10/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/13/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, James	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 6807 W. Courtyard Dr.  Austin, TX 78730-5015		
<b>8</b> Principal occupation / Job title (See Instructions) Semi retired tax consultant		<b>9</b> Employer (See Instructions) self
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nabers, Mary Scott	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code 901 S Mopac Bldg I #100  Austin, TX 78746		
Principal occupation / Job title (See Instructions) President/CEO		Employer (See Instructions) Strategic Partnerships, Inc.
Date 12/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, Howard	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 4610 Horseshoe Bnd  Austin, TX 78731		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neely, Mary Ann	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 1908 Barton Pky  Austin, TX 78704		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 12/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newberry, Diane	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 3801 Green Trl N  Austin, TX 78731		
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) AISD - Anderson HS

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/9 Rpt: 11/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/05/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivers, Richel <b>6</b> Contributor address; City; State; Zip Code 1209 W 5th St., Suite 200 Austin, TX 78703	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Rivers McNamara, PLLC
Date 12/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolke, Paul Contributor address; City; State; Zip Code 812 Edgecliff Ter. Austin, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) AFCU		Employer (See Instructions)
Date 12/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, David Contributor address; City; State; Zip Code 5901 Lonesome Valley Trail Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) self
Date 12/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stowell, Albert Contributor address; City; State; Zip Code 6303 Mercedes Bend Austin, TX 78749	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired 5466		Employer (See Instructions) none
Date 12/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Phil, & Carol Stall Contributor address; City; State; Zip Code 68 Mildred St. Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Historian		Employer (See Instructions) City of Austin

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/9 Rpt: 12/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/04/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Dianna	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code 3621 Claburn Dr  Austin, TX 78759		
<b>8</b> Principal occupation / Job title (See Instructions) Retired Certified Tumor Registrar		<b>9</b> Employer (See Instructions) Texas State Health Services
Date 12/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Sharon	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 4416 Ramsey  Austin, TX 78756		
Principal occupation / Job title (See Instructions) Service		Employer (See Instructions) Zenith Cafe Corp.
Date 12/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whately, Suzanne	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 5348 Magdalena Dr  Austin, TX 78735		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 12/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggins, Lynne	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 3310 Bridle Path  Austin, TX 78703		
Principal occupation / Job title (See Instructions) Attorney, Financial Advisor		Employer (See Instructions) Integrated Wealth Strategies
Date 12/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zarrabi, Azadeh	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 6611 Argentia Rd  Austin, TX 78756		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)

# 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: 1/7 Rpt: 13/21		<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/12/2016		<b>5</b> Payee name Atkins, Jesse		
<b>6</b> Amount (\$) \$132.00		<b>7</b> Payee address; City; State; Zip Code 1914 Patton Ln  Austin, TX 78723		
<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 Contract labor	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 12/12/2016		Payee name Austin Chronicle		
Amount (\$) \$1,545.00		Payee address; City; State; Zip Code PO Box 4189  Austin, TX 78765		
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 Political print advertising	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 12/13/2016		Payee name Austin's Pizza		
Amount (\$) \$156.25		Payee address; City; State; Zip Code 1600 W 35th St  Austin, TX 78731		
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage 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 food for volunteers	
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/7 Rpt: 14/21	<b>2</b> FILER NAME Alter, Alison	<b>3</b> Filer ID
<b>4</b> Date 12/31/2016	<b>5</b> Payee name DonateWay	
<b>6</b> Amount (\$) \$231.36	<b>7</b> Payee address; City; State; Zip Code P.O. Box 301267  Austin, TX 78703	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<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 merchant account processing fees for reporting period
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 12/13/2016	Payee name Eastside Pies	
Amount (\$) \$96.87	Payee address; City; State; Zip Code 5312 Airport Blvd.  Austin, TX 78751	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage 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 food for volunteers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 12/07/2016	Payee name Facebook	
Amount (\$) \$1,293.14	Payee address; City; State; Zip Code 1601 S. California Ave.  Palo Alto, CA 94304	
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 Political online advertising
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.

1 Total pages Schedule F1: Sch: 3/7 Rpt: 15/21		2 FILER NAME Alter, Alison		3 Filer ID	
4 Date 12/13/2016		5 Payee name Facebook			
6 Amount (\$) \$2,457.14		7 Payee address; City; State; Zip Code 1601 S. California Ave.  Palo Alto, CA 94304			
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 Political online advertising	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/12/2016		Payee name HEB			
Amount (\$) \$29.65		Payee address; City; State; Zip Code 1801 E 51st St  Austin, TX 78723			
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 food for volunteers	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/15/2016		Payee name Kruemke, Max			
Amount (\$) \$450.00		Payee address; City; State; Zip Code 4804 Blueberry Tr.  Austin, TX 78723			
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 video	
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: 4/7 Rpt: 16/21	<b>2</b> FILER NAME Alter, Alison	<b>3</b> Filer ID
<b>4</b> Date 12/10/2016	<b>5</b> Payee name Postmaster	
<b>6</b> Amount (\$) \$952.00	<b>7</b> Payee address; City; State; Zip Code 8225 Cross Park Dr,  Austin, TX 78710	
<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 Postage
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/06/2016	Payee name Rindy Miller Media	
Amount (\$) \$9,800.00	Payee address; City; State; Zip Code 2401 E 6th St  Austin, TX 78702	
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 Printing, postage & mailing services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/12/2016	Payee name Sheldon, Tyler	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 8718 Coastal Dr.  Austin, TX 78749	
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 Contract labor
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: 5/7 Rpt: 17/21		<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/14/2016		<b>5</b> Payee name Smith, Christian		
<b>6</b> Amount (\$) \$3,000.00		<b>7</b> Payee address; City; State; Zip Code 4612 Caswell Ave #B  Austin, TX 78751		
<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 Contract labor	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 12/07/2016		Payee name Staples		
Amount (\$) \$141.00		Payee address; City; State; Zip Code 1201 Barbara Jordan Blvd  Austin, TX 78723		
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 Postage	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 12/13/2016		Payee name Staples		
Amount (\$) \$47.61		Payee address; City; State; Zip Code 1201 Barbara Jordan Blvd  Austin, TX 78723		
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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/7 Rpt: 18/21	<b>2</b> FILER NAME Alter, Alison	<b>3</b> Filer ID
<b>4</b> Date 12/31/2016	<b>5</b> Payee name University Federal Credit Union	
<b>6</b> Amount (\$) \$0.20	<b>7</b> Payee address; City; State; Zip Code 4611 Guadalupe St  Austin, TX 78751	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<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 bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 12/12/2016	Payee name Winning Connections	
Amount (\$) \$2,217.38	Payee address; City; State; Zip Code 317 Pennsylvania Ave SE # 2  Washington, DC 20003	
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 Phone advertising services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 12/14/2016	Payee name Worley Printing	
Amount (\$) \$1,584.79	Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd  Austin, TX 78722	
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 printing
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/7 Rpt: 19/21	<b>2</b> FILER NAME Alter, Alison	<b>3</b> Filer ID
--	--------------------------------------	-------------------

<b>4</b> Date 12/12/2016	<b>5</b> Payee name Worley Printing
-----------------------------	--

<b>6</b> Amount (\$) \$503.36	<b>7</b> Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd  Austin, TX 78722
----------------------------------	---

<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 printing
---------------------------------	---	--

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 12/21/2016	Payee name Y Strategy
--------------------	--------------------------

Amount (\$) \$23,866.13	Payee address; City; State; Zip Code 3110 Manor Rd  Austin, TX 78723
----------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting 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 Phone calls, field services, printing, office supplies, graphic design, online advertising
-------------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 12/12/2016	Payee name Y Strategy
--------------------	--------------------------

Amount (\$) \$32,855.97	Payee address; City; State; Zip Code 3110 Manor Rd  Austin, TX 78723
----------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting 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 Field services, phone calls, online adv., office supplies, graphic design, consulting, printing
-------------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

--	--	--	--

# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
	Legal Services		OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: Sch: 1/1 Rpt: 20/21	<b>2</b> FILER NAME Alter, Alison	<b>3</b> Filer ID
--	--------------------------------------	-------------------

<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
--	----

<b>5</b> Date 12/14/2016	<b>6</b> Payee name Y Strategy
-----------------------------	-----------------------------------

<b>7</b> Amount (\$) \$7,500.00	<b>8</b> Payee address; City; State; Zip Code 3110 Manor Rd  Austin, TX 78723
------------------------------------	--

<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) Consulting 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 Consulting
----------------------------------	---	--

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1 Total pages Schedule G:</b> Sch: 1/1 Rpt: 21/21	<b>2 FILER NAME</b> Alter, Alison	<b>3 Filer ID</b>
<b>4 Date</b> 12/12/2016	<b>5 Payee name</b> P Terry's	
<b>6 Amount (\$)</b> \$52.18  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7 Payee address; City; State; Zip Code</b> 3303 N Lamar Blvd  Austin, TX 78705	
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food for volunteers
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate/Officeholder name	Office sought                      Office held