### SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

### FORM SPAC COVER SHEET SG 1

The SPAC Instruction	Guide explains how t	to complete this form.	. FILER ID Ethics Commission File	2. Total pages filed:
3 COMMITTEE NAME	Austin Forward PAC			OFFICE DSE ONLY  Date Received
4 COMMITTEE ADDRESS  Change of Address	MAILING ADDRESS PO Box 302854	APT/SUITE # CITY Austin	STATE: ZIP CODI TX 78703	<b>→</b>
5 CAMPAIGN TREASURER NAME	MS/MRS/MR NICKNAME	FIRST  Laura  LAST  Hernandez	MI SUFFIX	Receipt # O
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or Business)	STREET ADDRESS 710 Colorado Street	APT/SUITE # CITY  6c Austin	STATE: ZIP COL	Date Processed  Date Imaged
7 CAMPAIGN TREASURER'S MAILING ADDRESS  Change of Address	STREET OR PO BOX PO Box 302854	APT/SUITE #	CITY STAT	E: ZIP CODE 78703
9 REPORT TYPE	✓ January 15 ☐ July 15	30th day before e	ection	Exceeded \$500 limit Dissolution (attach PAC-DR) 10th day after campaign treasurer Permination
10 PERIOD COVERED	Month Da 10/30	y Year 0/2016 THROU	Month Day	Year
11 ELECTION	ELECTION DATE Month Day 11/08/2016	Year ELECTION TYP	E AND COLOR Runoff, State of	938 Other Description
·		GO TO PAGE	1	STORTAGE AND STORES
· 1	1 1	ao io i Adi	• •	· · · · · · · · · · · · · · · · · · ·

### SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

### FORM SPAC COVER SHEET SG 2

12 COMMITTEE NAME			13 Filer ID (Ethics Commission	
	Austin Forward PA	C	Filers)	
		,	.,,	
14 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME		
(Attach lists on plain paper to complete this report if necessary.)	CANDIDATE			
		OFFICE SOUGHT (candidate) / OFFICE HELD (officehol	der)	
SUPPORT ☐(Candidate or Measure)	OFFICEHOLDE			
OPPOSE				
(Candidate or Measure)		BALLOT IDENTIFICATION / # EL	ECTION DATE	
ASSIST (Officeholder)	MEASURE	DESCRIPTION .		
15 CONTRIBUTION TOTALS		LITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$0.00	
CONTRIBUTION BALANCE		ITIOAL CONTRIBUTIONS		
DALANCE	2 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$32,700.00			
OUTSTANDING				
LOAN TOTALS	3 TOTAL POL	ITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	\$0.00	
	4 TOTAL POL	ITICAL EXPENDITURES	\$133,090.17	
EXPENDITURE		LITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST IE REPORTING PERIOD	\$200.26	
TOTALS		NCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF DAY OF THE REPORTING PERIOD	\$0.00	
16 AFFIDAVIT	ROBERTO ACO Notary Public, State Comm. Expires 04-2 Notary ID 13019	of Texas is true and correct and includes all informe under Title 15. Election Code.	ry, that the accompanying report nation required to be reported by	
	<del>.</del> •	Signature of Campaig	in Treasurer	
AFFIX NOTARY S	TAMP / SEAL ABOVE		1110000101	
Sworn to and subscrit	oed before me, by the	esaid LAURA HERNANDEZ	this the	
MTH day of J,	ANUARY 20 17	to certify which, witness my hand and seal of office.		
Roto Azas	<del>   </del>	ROBERTO AZOSTA NO	TARY PUBLIC	
Signature of officer a	dministering oath	Printed name of officer administering oath Title	of officer administering oath	

### **SUBTOTALS - SPAC**

### FORM SPAC COVER SHEET PG 3

17.	COMMITTEE NAME Austin Forward PAC	18. FILER ID (Ett	hics Commission Filers)
19.	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTALS AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$28,800.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$1,400.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$0.00
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		\$2,500.00
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATIONS	ON OR LABOR	\$0.00
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR OR	GANIZATION	\$0.00
7.	SCHEDULE E: LOANS		\$0.00
8.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUT	TIONS	\$133,090.17
9.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$0.00
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIB	UTIONS	\$0.00
11.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$0.00
12.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINE	ESS OF C/OH	\$0.00
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIE	BUTIONS	\$0.00
14.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS RETO FILER	TURNED	\$6,002.62

#### **MONETARY POLITICAL CONTRIBUTIONS**

### SCHEDULE A1

The Instruction Guide explains how to complete this form.		Total pages Schedule A1:     not available
2. FILER NAM Austin Forwa		3. Filer ID (Ethics Commission Filers)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
11/07/2016	Ascension Health Ministry SVC CTR	\$5,000.00
	6. Contributor address; City; State; ZIP Code	45,000.00
	4040 Vincennes Cir Indianapolis, IN 46268-3027	
8. Principal oc	cupation / Job title (See Instructions) 9 Empl	oyer (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
11/03/2016	Stephen Coulston	\$25.00
•	6. Contributor address; City; State; ZIP Code	325.00
	8113 Ladera Verde Dr Austin, TX 78739-1920	
		loyer (See Instructions) Perkins+Will
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
11/02/2016	Richard Garriott de Cayeux	\$1,500.00
	6. Contributor address; City; State; ZIP Code	, , , , , , , , , , , , , , , , , , ,
	7400 Coldwater Cyn Rd Austin, TX 78730	
8. Principal oc		loyer (See Instructions) Portalarium
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
11/01/2016	Garver, LLC	\$5,000.00
	6. Contributor address: City; State; ZIP Code	
	4701 Northshore Dr North Little Rock, AR 72118-5325	
8. Principal oc	cupation / Job title (See Instructions) 9 Empl	loyer (See Instructions)
4. Date	Full name of contributorout-of-state PAC	7. Amount of contribution (\$)
11/07/2016	Husch Blackwell LLP	\$10,000.00
,	6. Contributor address; City; State; ZIP Code	
	190 Carondelet Plz Ste 600 Saint Louis, MO 63105-3433	
8. Principal oc	cupation / Job title (See Instructions) 9 Empl	loyer (See Instructions)

#### MONETARY POLITICAL CONTRIBUTIONS

### SCHEDULE A1

The	Instruction Guide explains how	to complete	this for	m.	Total pages Schedule A1:     not available	
2. FILER NAM Austin Forw			,		3. Filer ID (Ethics Commission	Filers)
4. Date	5. Full name of contributor	out-of-stat	te PAC _		7. Amount of contribution (\$)	
11/09/2016	Rick L'Amie					\$25.00
	6. Contributor address; 4016 Austin, TX 78759	City;	State;	ZIP Code		
8. Principal oc	ccupation / Job title (See Instruction	s)		9 Emplo	yer (See Instructions)	
Communi	cations Consultant			It	mages, Inc.	
4. Date	5. Full name of contributor	out-of-stat	te PAC _		7. Amount of contribution (\$)	
11/01/2016	NRE Ion LLC					\$1,250.00
·	6. Contributor address;	City;	State;	ZIP Code		
	526 University Dr E Bldg B Coll	ege Station, T	X 77840-	1986		
8. Principal od	ccupation / Job title (See Instruction	is)		9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-stat	te PAC		7. Amount of contribution (\$)	· · · · · · · · · · · · · · · · · · ·
11/04/2016	Stream Realty Partners-Austin, L	.P.				\$5,000.00
	6. Contributor address;	City;	State;	ZIP Code	,	
	2001 Ross Ave Ste 2800 Dallas,	ГХ 75201-293	30			
8. Principal oc	ccupation / Job title (See Instruction	is)		9 Emplo	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-stat	te PAC _		7. Amount of contribution (\$)	
11/04/2016	Joe Warnock					\$1,000.00
	6. Contributor address;	City;	State;	ZIP Code		
,	PO Box 302380 Austin, TX 7870	3-0040				
8. Principal oc President	ccupation / Job title (See Instruction	s)			yer (See Instructions) eamless Capital LP	

#### SCHEDULE A2

The Instruction Guide explains how to complete this form.			Total pages Schedule A2:     not available		
		3. Filer ID (Ethics Commission Filers)			
4. TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIBUT	IONS			\$0.00
5 Date	6 Full name of contributor out-o Bike Austin 7 Contributor address; City; State; Zip Code 1000 Brazos St Ste 100 Austin, TX 78701-2352	out-of-state PAC		8 Amount of contribution (\$) \$500.00	9 In-Kind contribution description  outreach efforts  le of Texas, complete Schedule T
10 Principal occu	pation / Job Title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR	NON-JU	JDICIAL) (See Instructi	ons)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's jo	b title (FC	OR JUDICIAL) (See Ins	structions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of con	tributor's	spouse (if any) (FOR	JUDICIAL)
16 If contributor is	s a child, law firm of parents (if any) (FOR JUDICIAL)				• .
5 Date 11/02/2016	Bike Austin 7 Contributor address; City; State; Zip Code 1000 Brazos St Ste 100 Austin, TX 78701-2352	address; City; State; Zip Code		<u> </u>	ie of Texas, complete Schedule T
10 Principal occu	upation / Job Title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR	NON-JU	JDICIAL) (See Instructi	ions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's joi	b title (F0	OR JUDICIAL) (See Ins	structions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of con	tributor's	spouse (if any) (FOR .	JUDICIAL)
16 If contributor i	is a child, law firm of parents (if any) (FOR JUDICIAL)				

#### SCHEDULE A2

The Instruction Guide explains how to complete this form.		Total pages Schedule A2:     not available			
2. FILER NAM Austin Forw			3. Filer ID (Ethics Commission Filers)		
4. TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIBUT	IONS	\$0.		
5 Date 11/03/2016	Bike Austin		8 Amount of 9 In-Kind contribution description outreach efforts		
10 Principal occu	pation / Job Title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR	Check if travel outside of Texas, complete Schedule T		
12 Contributor's p	principal occupation (FOR JUDICIAL)	13 Contributor's jo	bb title (FOR JUDICIAL) (See Instructions)		
14 Contributor's e	employer/law firm (FOR JUDICIAL)	15 Law firm of con	ntributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is	s a child, law firm of parents (if any) (FOR JUDICIAL)				
5 Date 11/04/2016	Bike Austin		8 Amount of description contribution (\$) 9 In-Kind contribution description outreach efforts \$100.00  Check if travel outside of Texas, complete Schedule T		
	pation / Job Title (FOR NON-JUDICIAL) (See Instructions)		· · · · · · · · · · · · · · · · · · ·		
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's jo	13 Contributor's job title (FOR JUDICIAL) (See Instructions)		
	emptoyer/law firm (FOR JUDICIAL)	15 Law firm of con	ntributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is	s a child, law firm of parents (if any) (FOR JUDICIAL)				

#### SCHEDULE A2

The Instruction Guide explains how to complete this form.		1. To	Total pages Schedule A2:     not available			
		3. Filer ID (Ethics Commission Filers)				
4. TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIBUTION	ONS			\$0.00	
5 Date 11/05/2016	6 Full name of contributorout-of-state PAC Bikc Austin 7 Contributor address; City; State; Zip Code		contribution (\$) desc		description outreach efforts	
	1000 Brazos St Ste 100 Austin, TX 78701-2352			Check if travel outside of Texas, complete Sched		
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR	NON-J	IUDICIAL) (See Instructi	ions)	
12 Contributor's p	principal occupation (FOR JUDICIAL)	13 Contributor's jot	b title (F	OR JUDICIAL) (See Ins	structions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of conf	tributor'	s spouse (if any) (FOR .	JUDICIAL)	
16 If contributor is	s a child, law firm of parents (if any) (FOR JUDICIAL)				,	
5 Date	6 Full name of contributorout-of-	-state PAC		8 Amount of contribution (\$)	9 In-Kind contribution description	
11/06/2016	7 Contributor address; City; State; Zip Code 1000 Brazos St Ste 100 Austin, TX 78701-2352			\$150.00	outreach efforts  te of Texas, complete Schedule T	
10 Principal occu	pation / Job Title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR	NON-	IUDICIAL) (See Instructi	ions)	
12 Contributor's p	principal occupation (FOR JUDICIAL)	13 Contributor's jol	b title (F	FOR JUDICIAL) (See Ins	structions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of cont	tributor'	s spouse (if any) (FOR .	JUDICIAL)	
16 If contributor i	s a child, law firm of parents (if any) (FOR JUDICIAL)					

#### SCHEDULE A2

The	Instruction Guide explains how to complet	te this form.		l pages Schedule t available	e A2:	
	2. FILER NAME Austin Forward PAC		3. Filer ID (Ethics Commission Filers)			
4. TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS		•	\$0.00	
5 Date	6 Full name of contributor Bike Austin 7 Contributor address; City; State: Zip Code 1000 Brazos St Ste 100 Austin, TX 78701-2352	out-of-state PAC	8	contribution (\$)	9 In-Kind contribution description  outreach efforts  le of Texas, complete Schedule T	
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR	NON-JUD	ICIAL) (See Instructi	ons)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's joi	13 Contributor's job title (FOR JUDICIAL) (See Instructions)			
14 Contributor's e	employer/law firm (FOR JUDICIAL)	15 Law firm of con	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
16 If contributor is	s a child, law firm of parents (if any) (FOR JUDICIAL)	<del> </del>				
5 Date	6 Full name of contributor	out-of-state PAC	8	Amount of	9 In-Kind contribution description	
1110010011	Bike Austin			contribution (\$)		
11/08/2016	7 Contributor address; City; State; Zip Code			\$200.00	outreach efforts	
	1000 Brazos St Ste 100 Austin, TX 78701-2352	<u>.</u> ,		\$200.00		
				Check if travel outsid	ie of Texas, complete Schedule T	
10 Principal occu	pation / Job Title (FOR NON-JUDICIAL) (See Instruction	11 Employer (FOR	NON-JUD	ICIAL) (See Instructi	ions)	
12 Cantributar's p	principal occupation (FOR JUDICIAL)	13 Contributor's jo	title (FOR	UDICIAL) (See Ins	structions)	
14 Contributor's e	employer/law firm (FOR JUDICIAL)	15 Law firm of con	tributor's sp	oouse (if any) (FOR .	JUDICIAL)	
16 If contributor is	s a child, law firm of parents (if any) (FOR JUDICIAL)					

### MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

#### SCHEDULE C1

The	e Instruction Guide explains how to complete this form.	Total pages Schedule C1:     not available			
2. FILER NAM Austin Forw		3. Filer ID (Ethics Commission Filers)			
4. Date 11/01/2016	<ul> <li>5. Corporation/Labor Organization name</li> <li>Kimley-Horn &amp; Assoc., Inc.</li> <li>6. Corporation/Labor Organization address: City State ZIP Code</li> <li>421 Fayetteville St Ste 600 Raleigh, NC 27601-1777</li> </ul>	7. Amount of contribution (\$) \$2,000.00			
4. Date 11/01/2016	<ul> <li>5. Corporation/Labor Organization name</li> <li>Kimley-Horn &amp; Assoc., Inc.</li> <li>6. Corporation/Labor Organization address: City State ZIP Code</li> <li>421 Fayetteville St Ste 600 Raleigh, NC 27601-1777</li> </ul>	7. Amount of contribution (\$) \$500.00			

	EXPENDIT	URE CATEGORIES	FOR BOX 8	(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Credit Card Payment	The Instruction Gui	de explains how to co	mplete this f	
Total pages Schedule F1:	2. FILER NAME	······································	3. File	er ID (Ethics Commission Filers)
	Austin Forward PAC			
4 Date	5 Payee name			
12/20/2016	34th Street Catering			··
6. Amount	7 Payee address;	City;	State:	Zip Code
\$4,066.92	1005 W 34th St Austin, TX 78	705-2008		· .
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	Otion heck if travel outside of Texas, complete Schedule T
PURPOSE OF	Food/Beverage Expense	•	=	heck if Austin, TX, officeholder living expense
EXPENDITURE			food and dr	ink
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		I Office sough	t Office held
4 Date	5 Payee name			
12/02/2016	Alexander Anstead	•		
6 Amount	7 Payee address;	City;	State:	Zip Code
\$200.00			•	
•	4600 W Guadalupe St Apt B14	1 Austin, TX 78751-29	56	•
8 BURDOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	OtiOn heck if travel outside of Texas, complete Schedule T
PURPOSE OF	Salaries/Wages/Contract Labor	΄.	. =	heck if Austin, TX, officeholder living expense
EXPENDITURE	-		Contract La	bor
9 Complete ONLY if direct	Candidate/Officeholder name		 Office sough	t Office held
expenditure to benefit C/OH	Candidate/Officeriolder flame		JJ. J.J.	
4 Date	5 Payee name			
11/01/2016	Austin Tejano Democrats PAC			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$1,000.00				
	2910 S Congress Ave Austin, T	X 78704-6424		
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion heck if travel outside of Texas, complete Schedule T
PURPOSE OF	Contributions/Donations Made By		_ =	heck if Austin, TX, officeholder living expense
EXPENDITURE	Candidate/Officeholder/Political Co	ommittee	Oùtreach	
9 Complete ONLY if direct	Candidate/Officeholder name		 Office sough	t Office held
expenditure to benefit C/OH	Canalitate/Officenolice Hame		o oougii	STIDO NOTA
	ATTACH ADDITIONAL COF	PIES OF THIS SCHI	EDULE AS	NEEDED

	EXPENDIT	TURE CATEGORIES	FOR BOX	( 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contral		Transportation Expense Travel In Distravel Out of	
Credit Card Payment	The Instruction Gui	de explains how to co	mplete this		
1. Total pages Schedule F1:	2. FILER NAME		3. F	iler ID (Ethics	Commission Filers)
	Austin Forward PAC				
4 Date	5 Payee name				
11/11/2016	Michael Balot				
6 Amount	7 Payee address;	City;	State:	-	Zip Code
\$570.00	2608B Carnarvon Ln Austin, T	X 78704-5602			
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Desc	ription	side of Texas, complete Schedule T
PURPOSE OF	Salaries/Wages/Contract Labor				X, officeholder living expense
EXPENDITURE			Contract	Labor	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	ght	Office held
4 Date	5 Payee name				
12/02/2016	Michael Balot				
6 Amount \$350.00	7 Payee address;	City;	State:	:	Zip Code
	2608B Carnarvon Ln Austin, T	X 78704-5602			
8	(a) Category (See categories listed	at the top of this schedule)	(b) Desc	ription	tide of Taxae, complete Schoolide T
PURPOSE	Salaries/Wages/Contract Labor		_	{	side of Texas, complete Schedule T  X. officeholder living expense
EXPENDITURE	Salares rages contract Labout		Contract	•	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	ght	Office held
	<u> </u>			. <u></u>	<del></del>
4 Date	5 Payee name				
11/10/2016 6 Amount	Black Sheep Lodge	City;	State:		Zip Code
6 Amount . '\$87.48	7 Payee address;	Oity,	State.	•	Th Code
	2108 S Lamar Blvd Austin, TX	78704-4993			
		<del>.</del>			
8	(a) Category (See categories listed	at the ten of this sale at the	(b) Desc	rintion	
PURPOSE	(See caregones listed	at the top of this schedule)		Check if travel outs	side of Texas, complete Schedule T
OF EXPENDITURE	Food/Beverage Expense		. –	•	X, officeholder living expense
EAFERDITURE			Food & D	2110K	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	ght	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE A	S NEEDED	

	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 The Instruction Gui	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.		
	2. FILER NAME			er ID (Ethics Commission Filers)		
1. Total pages ochedule FT.	Austin Forward PAC			er ib (Elinos Commission Fliers)		
	5 Payee name			<del></del>		
11/11/2016	David Bristow					
6 Amount \$1,490.00	7 Payee address;	City;	State:	Zip Code ·		
	1200 Garden St Austin, TX 78	102-3323				
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	ption heck if travel outside of Texas, complete Schedule T		
OF	Salaries/Wages/Contract Labor			heck if Austin, TX, officeholder living expense		
EXPENDITURE			Contract La	abor		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ot Office held		
4 Date	5 Payee name					
12/02/2016	David Bristow					
6 Amount \$300.00	7 Payee address;	City;	State:	Zip Code		
	1200 Garden St Austin, TX 78	702-5323				
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	ption heck if travel outside of Texas, complete Schedule T		
PURPOSE OF	Salaries/Wages/Contract Labor			theck if Austin, TX, officeholder living expense		
EXPENDITURE	data test trages contact Europ		Contract La			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held		
4 Date	5 Payee name					
11/11/2016	David Butts					
6 Amount \$5,000.00	7 Payee address;	City;	State:	Zip Code		
	1914 Patton Ln Austin, TX 78	723-1236				
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	ption heck if travel outside of Texas, complete Schedule T		
PURPOSE OF	Consulting Expense		_ =	heck if Mustin, TX, officeholder living expense		
EXPENDITURE	Controlle Sylveston		Consulting			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	it Office held		
	ATTACH ADDITIONAL COI	PIES OF THIS SCH	EDULE AS	NEEDED		

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Office Overhead/Rental Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Polling Expense Fees Consulting Expense Food/Beverage Expense Printing Expense Expense Contributions/Donations Made By Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Travel In District Candidate/Officeholder/Political Travel Out of District Legal Services Committee Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1. Total pages Schedule F1: 2. FILER NAME 3. Filer ID (Ethics Commission Filers) Austin Forward PAC 4 Date 5 Payee name 12/02/2016 **David Butts** Zip Code 6 Amount 7 Payee address; City; State: \$2,000.00 1914 Patton Ln Austin, TX 78723-1236 (b) Description Check if travel outside of Texas, complete Schedule T (a) Category (See categories listed at the top of this schedule) **PURPOSE** OF Check if Austin, TX, officeholder living expense Consulting Expense **EXPENDITURE** Consulting 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 11/11/2016 Quianna Canada Payee address; City; State: Zip Code 6 Amount \$1,125.00 6604 Bourg Cv Austin, TX 78744-5331 (b) Description Check if travel outside of Texas, complete Schedule T (a) Category (See categories listed at the top of this schedule) **PURPOSE** Check if Austin, TX, officeholder living expense OF Salaries/Wages/Contract Labor **EXPENDITURE** Contract Labor 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH 4 Date 5 Pavee name 12/02/2016 Quianna Canada State: Zip Code City; 6 Amount 7 Payee address; \$300.00 6604 Bourg Cv Austin, TX 78744-5331 (b) Description Check if travel outside of Texas, complete Schedule T 8 (a) Category (See categories listed at the top of this schedule) **PURPOSE** Check if Austin, TX, officeholder living expense OF · Salaries/Wages/Contract Labor **EXPENDITURE** Contract Labor Office held 9 Complete ONLY if direct Office sought Candidate/Officeholder name expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

	EXPENDIT	TURE 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 y Gift/Awards/Memorials Expense Legal Services The Instruction Gulo	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	ict Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
Total pages Schedule F1:	2. FILER NAME	<u>,</u>	3. Fi	ler ID (Ethics Commission Filers)
Total pages constals Ti	Austin Forward PAC			
4 Date	5 Payee name			
10/31/2016	Chi 'Lantro South Lamar			
6 Amount \$73.37	7 Payee address;	City;	State:	Zip Code
	1509 S Lamar Blvd Austin, TX	78704-2965		
8	(a) Catagon:		(b) Descri	intion
PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(c) Descri	Check if travel outside of Texas, complete Schedule T
OF	Food/Beverage Expense			Check if Austin, TX, officeholder living expense
EXPENDITURE		•	Food	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ht Office held
4 Date	5 Payee name	_		<del></del>
10/31/2016	Chi'Lantro			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$73.37	, ayoo aaanoo,		. •	·
	1509 S Lamar Blvd Austin, TX	78704-2965		
8	(a) Category (c)	and the state of the state of the state of	(b) Descri	intion
PURPOSE	(a) Category (See categories listed	at the top of this schedule)	``   '	Sheck if travel outside of Texas, complete Schedule T
OF	Food/Beverage Expense		_	Check if Austin, TX, officeholder living expense
EXPENDITURE			food	
9 Complete ONLY if direct	Candidate/Officeholder name		Office sough	nt Office held
expenditure to benefit C/OH			-	
4 Date	5 Payee name			· . ,
11/11/2016	Daniel V Chilton			
6 Amount	7 Payee address:	City;	State:	Zip Code
\$180.00	, , , , , , , , , , , , , , , , , , , ,			P
	1309 Webberville Rd Austin, T	X 78721-1404		
8	(a) Category (See categories listed	at the ten of this selection.	(b) Descri	intion ·
PURPOSE	(a) Outogory (See categories listed	at the top of this schedule)	l, , ∏a	Check if travel outside of Texas, complete Schedule T
OF	Salaries/Wages/Contract Labor			Check if Austin, TX, officeholder living expense
EXPENDITURE			Contract L	abor
9 Complete ONLY if direct	Candidate/Officeholder name		Office sough	ht Office held
expenditure to benefit C/OH				
·		·		
	ATTACH ADDITIONAL COF	PIES OF THIS SCH	EDULE AS	NEEDED

	EXPENDIT	TURE 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 y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contracted de explains how to contracted the explains how to contract the explains have the explain have the explains have the explains have the explains have the explains have the explain have the explain have the explains	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) orm.
Total pages Schedule F1:	2. FILER NAME Austin Forward PAC		3. File	er ID (Ethics Commission Filers)
4 Date 10/31/2016	5 Payee name David Chincanchan			
6 Amount \$1,757.20	7 Payee address; 4908 Parell Path Austin, TX 78	City; 8744-3808	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	1 =	otion neck if travel outside of Texas, complete Schedule T neck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date 11/15/2016	5 Payee name David Chincanchan			·
6 Amount \$1,757.19	7 Payee address; 4908 Parell Path Austin, TX 78	City; 3744-3808	State:	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	1 =	otion neck if travel outside of Texas, complete Schedule T neck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date 12/05/2016 6 Amount \$2,935.82	5 Payee name David Chincanchan 7 Payee address;	City;	State:	Zip Code
8	4908 Parell Path Austin, TX 78 (a) Category (See categories listed		(b) Descrip	otion
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	and the second		eck if travel outside of Texas, complete Schedule T neck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	d Office held
***	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE AS	NEEDED

	EXPENDIT	URE 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 The Instruction Guid	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contra	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
1. Total pages Schedule F1:	2. FILER NAME		3. Fil	ler ID (Ethics Commission Filers)
	Austin Forward PAC			•
4 Date	5 Payee name			
11/03/2016	Martha Cotera	•		•
6 Amount \$549.00	7 Payee address;	City;	State:	Zip Code
	1502 Norris Dr Austin, TX 787	V4-2U2 I		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	iption
PURPOSE OF	Fees		. =	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
EXPENDITURE	rees		Translation	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ht Office held
4 Date	5 Payee name			<del></del>
10/31/2016	Terrence N Dandy			
6 Amount \$320.00	7 Payee address;	City;	State:	Zip Code
	2505 Village Trail Cir Apt A A	ustin, TX 78744-3612		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	iption
PURPOSE OF	Salaries/Wages/Contract Labor		. =	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
EXPENDITURE	Salaries/ wages/Contract Labor		Contract La	<del>-</del>
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ht Office held
4 Date	5 Payee name			
11/04/2016	Terrence N Dandy			
6 Amount \$180.00	<ul><li>7 Payee address;</li><li>2505 Village Trail Cir Apt A A</li></ul>	City; ustin, TX 78744-3612	State:	Zip Code
	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	iption
PURPOSE OF	Salaries/Wages/Contract Labor		. =	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
EXPENDITURE	Samples Huges Contract Labor		Contract La	•
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	· ·	Office sough	ht Office held
	ATTACH ADDITIONAL COR	PIES OF THIS SCH	EDULE AS	S NEEDED

	EXPENDIT	URE CATEGORIES	FOR BOX	B(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 The Instruction Gui	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract de explains how to co	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Other (enter a category not listed above) form.
Total pages Schedule F1:	2. FILER NAME Austin Forward PAC		3. Fil	er ID (Ethics Commission Filers)
4 Date 11/03/2016	5 Payee name Easter Seals Central Texas			
6 Amount \$2,500.00	7 Payee address; 8505 Cross Park Dr Ste 120 At	City; astin, TX 78754-4552	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Contributions/Donations Made By Candidate/Officeholder/Political Co		_	theck if travel outside of Texas, complete Schedule T theck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	,	Office sough	ot Office held
4 Date 11/01/2016	5 Payee name Facebook			`
6 Amount \$15.21	7 Payee address; 1 Hacker Way Menlo Park, CA	City; , 94025-1456	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed  Advertising Expense	at the top of this schedule) .	_	ption heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ot Office held
4 Date 11/04/2016	5 Payee name Facebook			
6 Amount \$25.01	7 Payee address;  l Hacker Way Menlo Park, CA	City; , 94025-1456	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)		heck if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDI	URE CATEGORIES	FUR BU	A 6(a)	
Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense	Office Overhead/Renta Polling Expense Printing Expense		Solicitation/Fundraising Expense Transportation Equipment & Related Expense	
Contributions/Donations Made B Candidate/Officeholder/Political Committee	y Gift/Awards/Memorials Expense Legal Services	Salaries/Wages/Contra	ct Labor	Travel In District Travel Out of District Other (enter a category not listed abore)	ve)
Credit Card Payment	The Instruction Guid	de explains how to co	mplete thi		•,
1. Total pages Schedule F1:	2. FILER NAME		3. 1	Filer ID (Ethics Commission Filers)	
	Austin Forward PAC	·			
4 Date	5 Payee name				
12/01/2016	Facebook	·			
6 Amount \$9.78	7 Payee address;	City;	State	e: Zip Code	
<b>.</b>	t Hacker Way Menlo Park, CA	94025-1456	į.		
8 PURBOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Desc	cription Check if travel outside of Texas, complete Sched	ute T
PURPOSE OF	Advertising Expense	•		Check if Austin, TX, officeholder living expense	
EXPENDITURE			online ac	ds	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sou	ught Office held	
4 Date	5 Payee name				
10/31/2016	FedEx Office Print & Ship Cen	ters			
6 Amount \$66.56	7 Payee address;	City;	State	e: Zip Code	
	327 Congress Ave Austin, TX	78701-4058			
8	(a) Category (See categories listed	at the top of this schedule)	(b) Desc	Cription   Check if travel outside of Texas, complete Sched	ule T
PURPOSE OF	Printing Expense		=	Check if Austin, TX, officeholder living expense	
EXPENDITURE			Copies		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sou	ught Office held	
4 Date	5 Payee name .			<del></del> -	
10/31/2016	FedEx Office Print & Ship Cen	ters			
6 Amount	7 Payee address;	City;	State	e: · Zip Code	
\$507.83	127 C A A	79701 4059			
	327 Congress Ave Austin, TX	/8/01-4058			
8	(a) Category (See categories listed	at the top of this schedule)	(b) Desc		
PURPOSE		at the top of this scriedule)	, , , ,	Check if travel outside of Texas, complete Sched	
OF EXPENDITURE	Printing Expense	•	Copies	Check if Austin, TX, officeholder living expense	
			Copies		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sou	ught Office held	
	ATTACH ADDITIONAL COF	PIES OF THIS SCH	EDULE #	AS NEEDED	

	EXPENDIT	TURE 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 y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.
Total pages Schedule F1:		•		iler ID (Ethics Commission Filers)
7. Total pages conjugate 1 1.	Austin Forward PAC		0. 1	iso to (Earles Commission Frierry)
4 Date	5 Payee name			
10/31/2016	Frost Bank			
6 Amount \$15.00	7 Payee address;	City;	State:	Zip Code
	3525 Får West Blvd Austin, T	X 78731-3014		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descr	iption Check if travel outside of Texas, complete Schedule T
PURPOSE OF	Accounting/Banking		_ =	Check if Austin, TX, officeholder living expense
EXPENDITURE	Accounting/Danking		bank fees	·
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	ht Office held
4 Date	5 Payee name			
11/02/2016	Frost			•
6 Amount \$15.00	7 Payee address;	City;	State:	Zip Code
	401 Congress Ave Austin, TX	78701-3793		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descr	iption
PURPOSE	Accounting/Banking		_ =	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
EXPENDITURE	Accounting/Banking		Bank Fee	
				2.5
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	ht Office held
4 Date	5 Payee name	- ;		
11/30/2016	Frost			•
6 Amount	7 Payee address;	City;	State:	Zip Code
\$5.00				
	401 Congress Ave Austin, TX	78701-3793		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descr	iption
PURPOSE		at the top of this schedule)		Check if travel outside of Texas; complete Schedule T
OF EXPENDITURE	Accounting/Banking	•		Check if Austin, TX, officeholder living expense
EXECUTIONS		•	Bank Fee	
9 Complete ONLY if direct	Candidate/Officeholder name		Office soug	ht Office held
expenditure to benefit C/OH				
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE A	S NEEDED

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Advertising Expense Event Expense Office Overhead/Rental Accounting/Banking Polling Expense Transportation Equipment & Related Fees Consulting Expense Food/Beverage Expense Printing Expense Expense Travel In District Contributions/Donations Made By Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Legal Services Committee Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1. Total pages Schedule F1: 2. FILER NAME 3. Filer ID (Ethics Commission Filers) **Austin Forward PAC** 4 Date 5 Payee name 11/09/2016 GNI Consulting, LLC State: Zip Code 6 Amount 7 Payee address; City: \$1,823.00 P.O. Box 3685008 Austin, TX 78701 (b) Description Check if travel outside of Texas, complete Schedule T 8 (a) Category (See categories listed at the top of this schedule) **PURPOSE** Check if Austin, TX, officeholder living expense **OF** Consulting Expense **EXPENDITURE** Consulting Office held Office sought 9 Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH 4 Date 5 Payee name 11/12/2016 GNI Consulting, LLC Zip Code City; State: Payee address; 6 Amount \$1,560.00 P.O. Box 3685008 Austin, TX 78701 (b) Description Check if travel outside of Texas, complete Schedule T (a) Category (See categories listed at the top of this schedule) PURPOSE Check if Austin, TX, officeholder living expense OF Consulting Expense **EXPENDITURE** Consulting Office sought 9 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH 4 Date 5 Payee name GNI Consulting, LLC 12/02/2016 State: Zip Code City: 6 Amount 7 Payee address; \$1,000.00 P.O. Box 3685008 Austin, TX 78701 8 (b) Description | Check if travel outside of Texas, complete Schedule T (a) Category (See categories listed at the top of this schedule) **PURPOSE** Check if Austin, TX, officeholder living expense OF Consulting Expense **EXPENDITURE** Consulting 9 Complete ONLY if direct Office sought Office held Candidate/Officeholder name expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

	EXPENDIT	TURE CATEGORIES	FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac	Trar Exp ct Labor Trav Trav	citation/Fundraising Expense nsportation Equipment & Related ense vel In District vel Out of District er (enter a category not listed above)
Credit Card Payment		de explains how to co		` ,
Total pages Schedule F1:	2. FILER NAME Austin Forward PAC		3. Filer I	O (Ethics Commission Filers)
4 Date	5 Payee name			
11/11/2016	Michael Gramberg			
	7 Payee address;	City;	State:	Zip Code
\$1,265.00	8810 Tallwood Dr Apt 35 Aust	tin, TX 78759-7572		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Description	l if travel outside of Texas, complete Schedule T
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor		_	if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			•
12/02/2016	Michael Gramberg			
6 Amount \$300.00	7 Payee address;	City;	State:	Zip Code
	8810 Tallwood Dr Apt 35 Aus	tin, TX 78759-7572	_	
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Description	ì if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Salaries/Wages/Contract Labor		Check Contract Labor	if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			
11/07/2016	Gregory A. Copp Inc.			
6 Amount \$437.50	7 Payee address;	City;	State:	Zip Code
	1202 Nueces St Austin, TX 78	701-1720		•
8 DIIDDOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Description	1 if travel outside of Texas, complete Schedule T
PURPOSE OF	Accounting/Banking		_	if Austin, TX, officeholder living expense
EXPENDITURE			Quarerly Payrol	Returns
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE AS NE	EDED

	EXPENDIT	URE CATEGORIES	FOR BC	OX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contral		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Credit Card Payment	The Instruction Guid	de explains how to co	mplete ti	,
Total pages Schedule F1:	2. FILER NAME Austin Forward PAC		3.	. Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	<u>'';</u>	<u> </u>	
11/08/2016	Timothy A Hammitt			
6 Amount	7 Payee address;	City;	Stat	ate: Zip Code
\$600.00	1430 Frontier Valley Dr Trlr 97	7 Austin, TX 78741-531	9 .	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)		escription Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office so	ought Office held
4 Date	5 Payee name			
11/04/2016	НЕВ			
6 Amount \$10.73	7 Payee address; 2508 E Riverside Dr Austin, T	City; X 78741-3037	Stal	ate: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)		escription Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense & Drink
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office so	ought Office held
4 Date	5 Payee name			<del></del>
11/07/2016	HEB			
6 Amount : \$14.78	7 Payee address; 2508 E Riverside Dr Austin, TX	City; X 78741-3037	Stal	ate: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	[	Scription Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense & Drink
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office so	ought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDIT	URE CATEGORIES	FOR BOX	B(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Office Overhead/Rental Solicitation/Fundraising Expense Transportation Equipment & Related Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Legal Services Salaries/Wages/Contract Labor Travel In District Travel Out of District Other (enter a category not listed above)  The Instruction Guide explains how to complete this form.					
Total pages Schedule F1:	FILER NAME     Austin Forward PAC	,	3. Fil	er ID (Ethics Commission Filers)		
4 Date	5 Payee name					
11/15/2016	Laura Hernandez					
6 Amount	7 Payee address;	City;	State:	Zip Code		
\$4,440.27	2408 Manor Rd Apt 108 Austin	a, TX 78722-2020		•		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption		
PURPOSE OF	Salaries/Wages/Contract Labor		. =	heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense		
EXPENDITURE	Butta test wages contract Eacot		Salary	•		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held		
4 Date	5 Payee name					
11/15/2016	Laura Hernandez					
6 Amount \$2,387.27	7 Payee address;	City;	State:	Zip Code		
	2408 Manor Rd Apt 108 Austir	1,TX 78722-2020				
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	otion heck if travel outside of Texas, complete Schedule T		
PURPOSE OF	Salaries/Wages/Contract Labor		_ =	theck if Austin, TX, officeholder living expense		
EXPENDITURE	Ç		Salary			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held		
4 Date	5 Payee name					
12/05/2016	Laura Hernandez					
6 Amount	7 Payee address;	City;	State:	Zip Code		
\$4,103.52				,		
	2408 Manor Rd Apt 108 Austir	n, TX 78722-2020				
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption ·		
PURPOSE OF		•	_ =	heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense		
EXPENDITURE	Salaries/Wages/Contract Labor		Salary			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held		
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contra		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)	
Credit Card Payment	The Instruction Gui	de explains how to co	mplete this	form.	
Total pages Schedule F1:	FILER NAME     Austin Forward PAC		3. Fil	er ID (Ethics Commission Filers)	
4 Date 11/02/2016	5 Payee name Brandi Hopkins		•		
6 Amount \$360.00	7 Payee address;	City;	State:	Zip Code	
·	3301 Speedway Apt 204 Austi	n, 1X /8/05-2333	·		
PURPOSE OF EXPENDITURE	(a) Category (See categories listed	at the top of this schedule)	1 =	heck if travel outside of Texas, complete Schedule T theck if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held	
4 Date	5 Payee name	-			
11/07/2016	Influence Opinions				
6 Amount \$6,250.00	7 Payee address; 611 S Congress Ave Ste 100 A	City; ustin, TX 78704-1749	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)	_ =	heck if travel outside of Texas, complete Schedule T theck if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ot Office held	
4 Date 11/09/2016	5 Payee name Intuit				
6 Amount , \$20.79	7 Payee address; 2632 Marine Way Ms 2675 Me	City; Duntain View, CA 9404.	State: 3-1126	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed	at the top of this schedule)	1 =	heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	nt Office held	
	ATTACH ADDITIONAL COI	PIES OF THIS SCH	EDULE AS	S NEEDED	

	EXPENDIT	URE CATEGORIES	FUR BOX	8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contra		Solicitation/Fundrai Transportation Equ Expense Travel In District Travel Out of District Other (enter a cales	ipment & Related
Credit Card Payment	The Instruction Gui	de explains how to co	mplete this		30.3 Not hated above)
Total pages Schedule F1:	2. FILER NAME Austin Forward PAC		3. Fi	iler ID (Ethics Com	mission Filers)
4 Date 11/10/2016	5 Payee name Intuit				
6 Amount	7 Payee address;	City;	State:	Zip	Code
\$29.32	2632 Marine Way Ms 2675 Mo	ountain View, CA 9404	3-1126		
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descr	iption Check if travel outside of T	exas, complete Schedule T
OF EXPENDITURE	Accounting/Banking		_	Check if Austin, TX, office	,
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	ht	Office held
4 Date	5 Payee name				
12/07/2016	Intuit				
6 Amount \$20.79	7 Payee address;	City;	State:	Zip	Code
320.79	2632 Marine Way Ms 2675 Me	ountain View, CA 9404:	3-1126		
8 PURPOSE OF	(a) Category (See categories listed  Accounting/Banking	at the top of this schedule)	_ =	iption Check if travel outside of T Check if Austin, TX, office	exas, complete Schedule T cholder living expense
EXPENDITURE			Accountin	ng Fee	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	ht	Office held
4 Date	5 Payee name				
12/07/2016	Intuit				
6 Amount \$29.32	7 Payee address;	City;	State:	Zij	o Code
\$29.32	2632 Marine Way Ms 2675 Mo	ountain View, CA 9404	3-1126		
8 PLIPPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descr	ription Check if travel outside of 1	exas, complete Schedule T
PURPOSE OF	Accounting/Banking		_ =	Check if Austin, TX, office	
EXPENDITURE			Accountin	ng Fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	iht .	Office held
	· · · · · · · · · · · · · · · · · · ·				
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE A	S NEEDED	

	EXPENDIT	TUHE CATEGORIES	FUR BU	x o(a)	-
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract		Solicitation/Fundraising Ex Transportation Equipment Expense Travel In District Travel Out of District Other (enter a category no	& Related
Credit Card Payment	The Instruction Gui	de explains how to cor		is form.	·
Total pages Schedule F1:	FILER NAME     Austin Forward PAC		3. 1	Filer ID (Ethics Commissio	n Filers)
4 Date 11/01/2016	5 Payee name La Mexicana Bakery	`			
6 Amount \$38.02	7 Payee address; 1924 S 1st St Austin, TX 7870	City; 4-4254	State	: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Desc	Check if travel outside of Texas, co Check if Austin, TX, officeholder li	•
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sou	ight Office	held
4 Date 11/11/2016	5 Payee name Angelina LaPerla				
6 Amount \$1,040.00	7 Payee address; 8804 Tallwood Dr Apt 35 Aust	City; tin, TX 78759-7553	State	e: Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	(b) Desc	Check if travel outside of Texas, co Check if Austin, TX, officeholder li	•
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sou	ight Office	held
4 Date 12/02/2016	5 Payee name Angelina LaPerla				
6 Amount \$300.00	7 Payee address; 8804 Tallwood Dr Apt 35 Aust	City; tin, TX 78759-7553	State	e: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	(b) Desc	Check if travel outside of Texas, co Check if Austin, TX, officeholder li	='
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sou	ght Office	held
	ATTACH ADDITIONAL COP	PIES OF THIS SCH	EDULE A	AS NEEDED	

	EXPENDI	TURE CATEGORIES	FOR E	SUX 8(a)	
Candidate/Officeholder/Political	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac	ct Labo	Transpor Expense or Travel In Travel O	ut of District
Committee Credit Card Payment	The Instruction Gui	de explains how to co	mplete		iter a category not listed above)
1. Total pages Schedule F1:	2. FILER NAME			3. Filer ID (Etl	nics Commission Filers)
	Austin Forward PAC				
4 Date	5 Payee name	•			
11/14/2016	Lavaca Street Bar	City	e.	tato:	Zin Cado
6 Amount \$1,491.75	7 Payee address;	City;	3	tate:	Zip Code
•	405 Lavaca St Austin, TX 7870	01-2927			
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) D	escription	l outside of Texas, complete Schedule T
OF	Food/Beverage Expense			=	in, TX, officeholder living expense
EXPENDITURE			Food	l & Drink	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office	sought	Office held
4 Date	5 Payee name				
11/14/2016	Lavaca Street Bar				·
6 Amount	7 Payee address;	City;	S	tate:	Zip Code
\$115.50	405 Lavaca St Austin, TX 787	01-2927			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed	I at the top of this schedule)		=	I outside of Texas, complete Schedule T in, TX, officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder name			sought	Office held
expenditure to benefit C/OH		;		<b>.</b>	
4 Date	5 Payee name				
11/07/2016	Little Caesar's Pizza				
6 Amount	7 Payee address;	City;	s	tate:	Zip Code
\$56.63	4410 E Riverside Dr Ste 170 A	Lustin, TX 78741-4799			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)			I outside of Texas, complete Schedule T in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office	sought	Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDUL	E AS NEEDI	ED .

	EXPENDIT	URE CATEGORIES	FOR BOX 8	B(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 The Instruction Gui	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contra- de explains how to co	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Total pages Schedule F1:				er ID (Ethics Commission Filers)
1. Total pages scriedule F1.	Austin Forward PAC		J. FII	er ib (Eurics Commission Filers)
4 Date	5 Payee name			
11/11/2016	Avery Lundy		•	
6 Amount - \$690,00	7 Payee address;	City;	State:	Zip Code
	7709 Kiva Dr Austin, TX 7874	9-2917		•
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption heck if travel outside of Texas, complete Schedule T
PURPOSE OF	Salaries/Wages/Contract Labor			heck if Austin, TX, officeholder living expense
EXPENDITURE	·		Contract La	abor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
12/02/2016	Avery Lundy			
6 Amount \$200.00	7 Payee address;	City;	State:	Zip Code
	7709 Kiva Dr Austin, TX 7874	9-2917		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	otion heck if travel outside of Texas, complete Schedule T
PURPOSE	Salaries/Wages/Contract Labor		. =	heck if Austin, TX, officeholder living expense
EXPENDITURE	Salares Wages conduct Labor		Contract La	
9 Complete ONLY if direct	Candidate/Officeholder name	·	Office sough	t Office held
expenditure to benefit C/OH				
4 Date	5 Payee name			
11/11/2016	Patrick J. McDonald			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$1,750.00				
	115 Coleman St Austin, TX 78	704-6317		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	otion heck if travel outside of Texas, complete Schedule T
PURPOSE OF	Salaries/Wages/Contract Labor		. =	heck if traver outside of Texas, complete scriedule The
EXPENDITURE	Salatos Vagos Contact Escol		Contract La	abor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE AS	NEEDED

	EXPENDIT	TURE CATEGORIES	FOR BOX	3(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Legal Services	·	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
•		de explains how to co	·	. ==
Total pages Schedule F1:	2. FILER NAME Austin Forward PAC		3. Fil	er ID (Ethics Commission Filers)
4 Date 12/02/2016	5 Payee name Patrick J. McDonald			
6 Amount \$3,000.00	7 Payee address;	City;	State:	Zip Code
	115 Coleman St Austin, TX 78	704-6317		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	_	heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ot Office held
4 Date	5 Payee name			
11/03/2016	James McKinney			
6 Amount \$1,500.00	7 Payee address; 6917 Langston Dr Austin, TX	City; 78723-2219	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)		heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	office held
4 Date 11/11/2016	5 Payee name James McKinney			
6 Amount \$1,500.00	7 Payee address; 6917 Langston Dr Austin, TX	City; 78723-2219	State:	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)		heck if travet outside of Texas, complete Schedule T theck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE AS	NEEDED

	EXPENDIT	TURE CATEGORIES	FOR BOX	8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra		Solicitation/Fundraising to Transportation Equipment Expense Travel In District Travel Out of District Other (enter a category of the content of the co	nt & Related
Credit Card Payment	The Instruction Gui	de explains how to co	mplete this	form.	
Total pages Schedule F1:	FILER NAME     Austin Forward PAC		3. Fi	iler ID (Ethics Commiss	ion Filers)
4 Date 11/07/2016	5 Payee name MedSpring-AUS-Central Aust	in			
6 Amount \$165.00	7 Payee address; 3906 N Lamar Blvd Ste 100 A	City; ustin, TX 78756-4000	State:	Zip Coc	de ·
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule) .		Check if travel outside of Texas, Check if Austin, TX, officeholde	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	ht Offi	ce held
4 Date 11/29/2016	5 Payee name NGP VAN, Inc.				
6 Amount \$196.62	7 Payee address; 1101 15th St NW Ste 500 Was	City; hington, DC 20005-500	State:	Zip Cod	de
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Solicitation/Fundraising Expense	at the top of this schedule)	_ =	iption Check if travel outside of Texas, Check if Austin, TX, officeholde	The state of the s
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	ht Offi	ce held
4 Date 11/02/2016	5 Payee name OfficeMax / Office Depot				
6 Amount \$160.19	7 Payee address; 2101 S Lamar Blvd Austin, TX	City; C78704-4921	State:	Zip Cod	de
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)		Check if travel outside of Texas, Check if Austin, TX, officeholde	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	ht Offi	ce held
,	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE A	S NEEDED	

<u>.</u>	EXPENDIT	UHE CATEGURIES	FOR BOX 8	(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract	ct Labor	Solicitation/Fundraising Exp Transportation Equipment Expense Travel In District Travel Out of District Other (enter a category not	& Related
Credit Card Payment	The Instruction Gui	de explains how to co			· iisted above)
Total pages Schedule F1:	2. FILER NAME Austin Forward PAC		3. File	er ID (Ethics Commission	n Filers)
4 Date 11/07/2016	5 Payee name OfficeMax / Office Depot				
6 Amount \$35.13	7 Payee address; 2101 S Lamar Blvd Austin, TX	City; 78704-4921	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	_	heck if Iravel outside of Texas, cor heck if Austin, TX, officeholder liv	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office	held
	5 Payee name			· · · · · · · · · · · · · · · · · · ·	
11/02/2016	Khai Parker	City;	State:	Zip Code	
6 Amount \$90.00	7 Payee address; 9601 Middle Fiskville Rd Apt	•		. Zip code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)		heck if travel outside of Texas, cor heck if Austin, TX, officeholder liv	·
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office	held
11/11/2016	5 Payee name Rifeline LLC				
6 Amount \$20,000.00	7 Payee address; 1214 W 5th St Ste C Austin, T	City; X 78703-5274	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Consulting Expense	at the top of this schedule)	_ =	otion heck if travel outside of Texas, co heck if Austin, TX, officeholder liv	•
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office	held
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE AS	NEEDED	

	EXPENDIT	TURE 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 The Instruction Guid	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra  de explains how to co	ct Labor	Transportation Expense Travel In Dis Travel Out o Other (enter	
Total pages Schedule F1:	2. FILER NAME Austin Forward PAC		3. Fil	er ID (Ethics	s Commission Filers)
4 Date 11/11/2016	5 Payee name Ryan Rosshirt				
6 Amount \$1,125.00	7 Payee address; 2713 Windswept Cv Apt 101 A	City; Austin, TX 78745-1408	State:		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	=	theck if travel out theck if Austin, T	iside of Texas, complete Schedule T 'X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	it	Office held
4 Date 12/02/2016	5 Payee name Ryan Rosshirt				
6 Amount \$400.00	7 Payee address; 2713 Windswept Cv Apt 101 A	City; Austin, TX 78745-1408	State:		Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)		Sheck if travel out Sheck if Austin, T	iside of Texas, complete Schedule T 'X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ıt	Office held
4 Date 11/04/2016	5 Payee name Sage Payment Solutions				
6 Amount \$5,999.23	7 Payee address; 12120 Sunset Hills Rd Ste 500	City; Reston, VA 20190-585	State: 8		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Accounting/Banking	at the top of this schedule)		heck if travel out heck if Austin, T	iside of Texas, complete Schedule T 'X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	it .	Office held
	ATTACH ADDITIONAL COR	PIES OF THIS SCH	EDULE AS	NEEDED	

	EXPENDIT	TORE CATEGORIES	FOR BOX	. ʁ(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac	et Labor	Expense Travel In District Travel Out of Dist	quipment & Related
Credit Card Payment		de explains how to cor		s form.	
Total pages Schedule F1:	2. FILER NAME Austin Forward PAC		3. F	Filer ID (Ethics Co	mmission Filers)
4 Date	5 Payee name				
12/02/2016	Sage Payment Solutions		01-1-		7: 0:1:
6 Amount \$179.97	7 Payee address;	City;	State:	•	Zip Code
	12120 Sunset Hills Rd Ste 500	Reston, VA 20190-5858	3 .		
8 PURDOCE	(a) Category (See categories listed	at the top of this schedule)	(b) Desc	ription Check if travel outside o	of Texas, complete Schedule T
PURPOSE OF Expenditure	Accounting/Banking		_ =	Check if Austin, TX, off	ficeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder name		Office soug	aht .	Office held
expenditure to benefit C/OH	Candidate/Officerfolder name		Office soug	giit.	Office Head
4 Date	5 Payee name				
11/11/2016	Christian Smith				
6 Amount \$1,500.00	7 Payee address;	City;	State:	:	Zip Code
٠	4612 Caswell Ave Austin, TX	78751-3352			
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Desc	<b>ription</b>  Check if travel outside o	of Texas, complete Schedule T
OF	Salaries/Wages/Contract Labor			1	ficeholder living expense
EXPENDITURE			Contract	labor	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office soug	ght	Office held
4 Date	5 Payee name				
12/02/2016	Christian Smith				
6 Amount	7 Payee address;	City;	State:	;	Žip Code
\$2,000.00					
	4612 Caswell Ave Austin, TX	78751-3352			
8	(a) Category (See categories listed	at the ten of this cale of the	(b) Desc	ription	
PURPOSE		at the top of this scriedule)	I) /	Check if travel outside of	of Texas, complete Schedule T
OF EXPENDITURE	Salaries/Wages/Contract Labor		Contract	•	ficeholder living expense
			Contract	14UUI	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	· ···-	Office soug	ght	Office held
	<u> </u>				
	ATTACH ADDITIONAL CO	PIES OF THIS SCHI	EDULE A	S NEEDED	

	EXPENDIT	TURE CATEGORIES I	FOR BOX	( 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac		Solicitation/Fundrai Transportation Equ Expense Travel In District Travel Out of Distric Other (enter a cate	pment & Related
Credit Card Payment	· The Instruction Gui	de explains how to con	nplete this	s form.	
Total pages Schedule F1:	2. FILER NAME Austin Forward PAC		3. F	Filer ID (Ethics Com	mission Filers)
4 Date	5 Payee name	·			
11/07/2016 6 Amount	SnapChat Inc. 7 Payee address;	City;	State:	: Zir	Code
\$1,232.37	r rayee address,			· <del>-</del> -,	
	63 Market St Venice, CA 9029	1-3603		<u>.</u>	
8	(a) Category (See categories listed	at the top of this schedule)	(b) Desc	ription Check if travel outside of T	exas, complete Schedule T
PURPOSE OF	Advertising Expense			Check if Austin, TX, office	•
EXPENDITURE			online me	edia buy	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name .	,	Office soug	ght	Office held
4 Date	5 Payee name			-	
11/04/2016	Southside Flying Pizza				
6 Amount \$137.43	7 Payee address;	City;	State	: Zi <sub>l</sub>	o Code
<b>4.571.6</b>	1224 S Lamar Blvd Austin, TX	78704-2369			
8	(a) Category (See categories listed	at the top of this schedule)	(b) Desc	ription Check if travel outside of I	exas, complete Schedule T
PURPOSE OF	Food/Beverage Expense	•		Check if Austin, TX, office	·
EXPENDITURE	,		Food for	Field	
9 Complete ONLY if direct	Candidate/Officeholder name	(	l Office sou	_ ght	Office held
expenditure to benefit C/OH		·-··-			
4 Date	5 Payee name		•		
11/07/2016	Southside Flying Pizza	0.11	<u> </u>		
6 Amount \$141.74	7 Payee address;	City;	State:	: Zip	Code
\$141./4	1224 S Lamar Blvd Austin, TX	78704-2369			
	1224 6 Lamai Biva Masun, 124	10104 2309			
8	(a) Category (See categories listed	at the top of this schedule)	(b) Desc		
PURPOSE	·	actine top of this senedule)	l`	Check if travel outside of T Check if Austin, TX, office	exas, complete Schedule T
OF EXPENDITURE	Food/Beverage Expense		Food for	•	
9 Complete ONLY if direct	Condidate/Officebaldes asses		Office sou	aht	Office held
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		cince soni	Aur	Onice rield
	<u></u>			· · · · · · · · · · · · · · · · · · ·	<u> </u>
	ATTACH ADDITIONAL CO	PIES OF THIS SCHE	DULE A	AS NEEDED	

	EXPENDIT	URE CATEGORIES	FOR BOX	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contra		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
Credit Card Payment	The Instruction Guid	de explains how to co	mplete this	
1. Total pages Schedule F1:	2. FILER NAME		3. Fil	er ID (Ethics Commission Filers)
	Austin Forward PAC			
4 Date	5 Payee name		<u>-</u>	
11/02/2016	Texas Workforce Commission			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$767.25	101 E 15th St Austin, TX 7877	8-1442		
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	
PURPOSE OF	Salaries/Wages/Contract Labor		. =	heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
EXPENDITURE	Salaries/ Wages/Contract Labor		Payroll Tax	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
11/09/2016	The Home Depot			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$155.60	3600 S Interstate 35 Austin, TX	( 78704-7419	·	
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	Otion heck if travel outside of Texas, complete Schedule T
OF	Office Overhead/Rental Expense		. =	heck if Austin, TX, officeholder living expense
EXPENDITURE			Field suppl	ies
9 Complete ONLY if direct	Candidate/Officeholder name		Office sough	ot Office held
expenditure to benefit C/OH	Sandradio Sinosino del Fiamo			
4 Date	5 Payee name	•		
11/07/2016	Time Warner, Inc.			
6 Amount	7 Payee address;	City;	State:	Zip Code
\$1,037.00	:			
	1 Time Warner Ctr New York,	NY 10019-6038	•	
8	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	
PURPOSE		,,	_ =	heck if Iravel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense
OF EXPENDITURE	Office Overhead/Rental Expense		Internet Se	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	office held
experience to belieff 0/011	<u> </u>		•	
	ATTACH ADDITIONAL COI	PIES OF THIS SCH	EDULE AS	NEEDED

	EXPENDIT	TURE CATEGORIES	FOR BC	)X 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract		Transportatio Expense Travel In Dist Travel Out of	
Credit Card Payment	The Instruction Gui	de explains how to co	mplete ti		a category not listed above)
Total pages Schedule F1:	2. FILER NAME Austin Forward PAC		3.	Filer ID (Ethics	Commission Filers)
4 Date 11/30/2016	5 Payee name Time Warner, Inc.				
6 Amount	7 Payee address;	City;	Stat	te:	Zip Code
\$313.45	1 Time Warner Ctr New York,	NY 10019-6038			
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Des	scription Check if travel outs	side of Texas, complete Schedule T
OF EXPENDITURE	Office Overhead/Rental Expense		Interne		X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office so	pught	Office held
4 Date	5 Payee name		_		
11/10/2016	Turf N' Surf		·		
6 Amount \$333.84	7 Payee address; 407 Lavaca St Austin, TX 7870	City; 01-2927	Stat	<b>:</b>	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Des	Check if Austin, T	side of Texas, complete Schedule T X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office so	ought	Office held
4 Date	5 Payee name				
11/10/2016	Turf N' Surf				
6 Amount \$49.80	7 Payee address; 407 Lavaca St Austin, TX 7870	City; 01-2927	Stat	<b>te:</b>	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Food/Beverage Expense	at the top of this schedule)	(b) Des	Check if Austin, T	side of Texas, complete Schedule T X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office so	pught	Office held
	ATTACH ADDITIONAL COR	PIES OF THIS SCHI	EDULE	AS NEEDED	

•	EXPENDIT	TURE CATEGORIES	FOR BOX 8	B(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District
Credit Card Payment	The Instruction Gui	de explains how to co	mplete this	Other (enter a category not listed above) form.
Total pages Schedule F1:	FILER NAME     Austin Forward PAC		3. Fil	er ID (Ethics Commission Filers)
4 Date	5 Payee name		•	
11/14/2016	United States Treasury			
6 Amount \$6,950.15	7 Payee address;	City;	State:	Zip Code
, 30,930.13	Eftps 1500 Pennsylvania Ave.,	N.W. Washington, DC	20220-0001	
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	Dtion heck if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Salaries/Wages/Contract Labor		_ =	heck if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			
12/12/2016	United States Treasury	·	_	
6 Amount \$5,315.44	7 Payee address;	City;	State:	Zip Code
·	Eftps 1500 Pennsylvania Ave.,	N.W. Washington, DC	20220-0001	
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	otion heck if travel outside of Texas, complete Schedule T
OF	Salaries/Wages/Contract Labor		_ =	heck if Austin, TX, officeholder living expense
EXPENDITURE			Payroll Tax	res
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held
4 Date	5 Payee name			·
12/14/2016	United States Treasury			
6 Amount \$5,326.69	7 Payee address;	City;	State:	Zip Code
	Eftps 1500 Pennsylvania Ave.,	N.W. Washington, DC	20220-0001	. •
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descri	ption heck if travel outside of Texas, complete Schedule T
OF .	Salaries/Wages/Contract Labor		. =	heck if Austin, TX, officeholder living expense
EXPENDITURE			Payroll Tax	ses
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	· · · · · ·	Office sough	t Office held
	ATTACH ADDITIONAL CO	PIES OF THIS SCH	EDULE AS	NEEDED

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 Office Overhead/Rental Fees Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Legal Services  The Instruction Guide explains how to complete thi		ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)		
Total pages Schedule F1:	Austin Forward PAC		J. 11	er ib (Eliilos Commission Filers)		
4 Date 11/07/2016	5 Payee name Walgreens					
6 Amount \$47.18	7 Payee address;	City;	State:	Zip Code		
-	4501 Guadalupe St Austin, TX	78751-2937				
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Office Overhead/Rental Expense	at the top of this schedule)	_ =	heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held		
4 Date	5 Payee name					
11/09/2016	Kimie Warren	•				
6 Amount \$360.00	7 Payee address; 4501 E Riverside Dr Apt 3028	City; Austin, TX 78741-4783	State:	Zip Code		
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	. =	heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held		
4 Date	5 Payee name					
10/31/2016	Katherine Wehler					
6 Amount \$1,076.20	7 Payee address; 1144 Eleanor St Austin, TX 78	City; 721-2116	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)	_ =	otion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held		
	ATTACH ADDITIONAL COI	PIES OF THIS SCH	EDULE AS	NEEDED		

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac	ct Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)		
Credit Card Payment	The Instruction Gui	de explains how to cor				
Total pages Schedule F1:	2. FILER NAME Austin Forward PAC		3. File	r ID (Ethics Commission Filers)		
4 Date	5 Payee name					
11/15/2016	Katherine Wehler	City	Ctata	Zip Code		
6 Amount \$1,076.19	7 Payee address; 1144 Eleanor St Austin, TX 78	City; 721-2116	State:	ZIP Code		
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	tion eck if travel outside of Texas, complete Schedule T		
OF EXPENDITURE	Salaries/Wages/Contract Labor		Salary	eck if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held		
4 Date	5 Payee name					
12/05/2016	Katherine Wehler					
6 Amount \$882.82	7 Payee address;	City;	State:	Zip Code		
	1144 Eleanor St Austin, TX 78	721-2116				
PURPOSE	(a) Category (See categories listed	at the top of this schedule)	_	eck if travel outside of Texas, complete Schedule T		
OF EXPENDITURE	Salaries/Wages/Contract Labor		Salary	eck if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held		
4 Date	5 Payee name					
10/31/2016	Jim Wick					
6 Amount \$3,851.15	7 Payee address;	City;	State:	Zip Code		
	10551 Billbrook Pl Austin, TX	78748-2430				
8 PURPOSE	(a) Category (See categories listed	at the top of this schedule)	(b) Descrip	tion eck if travel outside of Texas, complete Schedule T		
OF EXPENDITURE	Salaries/Wages/Contract Labor		Salary	eck if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held		
	ATTACH ADDITIONAL COI	PIES OF THIS SCHI	EDULE AS	NEEDED .		

### 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 y Gift/Awards/Memorials Expense Legal Services The Instruction Gui	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra de explains how to co	act Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above) form.	
Total pages Schedule F1:	FILER NAME     Austin Forward PAC		3. File	er ID (Ethics Commission Filers)	
4 Date 11/15/2016	5 Payee name Jim Wick				
6 Amount \$3,851.15	7 Payee address; 10551 Billbrook Pl Austin, TX	City; 78748-2430	State:	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)		ption heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held	
4 Date 12/05/2016	5 Payee name Jim Wick	·			
6 Amount \$4,524.65	7 Payee address; 10551 Billbrook Pl Austin, TX	City; 78748-2430	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Salaries/Wages/Contract Labor	at the top of this schedule)		Dtion heck if travel outside of Texas, complete Schedule T heck if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	t Office held	

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

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

#### SCHEDULE K

The Instruction Guide explains how to complete this form.		1.	Total pages Schedule K:     not available		
2. FILER NAM Austin Forw		3.	. Filer ID (	Ethics Commission Filers)	
4. Date	5 Name of person from whom amount is received	<u>`</u>		8 Amount	
11/01/2016	Bike Share of Austin			\$6,002.62	
	6 Address of person from whom amount is received; City; State; Zip C 1000 Brazos St Ste 100 Austin, TX 78701-2352	ode			
	7 Purpose for which amount is received	-	Check if	political contribution returned to filer	