OCC RECEIVED AT NOV 1'18 PH2:34

Use this form to report contributions received and expenditures made between the 9th day before the Election and the day before the Election that have met the monetary thresholds identified in City Code 2-2-29. For detailed instructions on how to complete this form, see the **Pre-Election Report: Political Committees Instruction Guide**

1		Committee Nam	ne*			i				
	COMMITTEE NAME	Keep Austin Affo	ordable							
2		Address/ PO Box			Apartment or Suite Number					
	COMMITTEE	P.O. Box 1136								
	ADDRESS	City				Stat	е	Zip Code	e	
		Austin				TX		78767		
3		Title	First Name					Middle Initia	<u></u>	
	COMMITTEE TREASURER		Ed							
	NAME	Nickname		Last Nam	e				Suffix	
				McHorse						
		Address/ PO Box	«			Apa	rtment or S	Suite Nu mber		
4	COMMUTTEE TREACHER	600 Congress Ave.			2100					
	COMMITTEE TREASURER ADDRESS	City				Stat	e	Zip Code	9	
	ADDRESS	Austin		·····		ТХ		78701		
5		Start Date (yyyymmdd)*				End Date (yyyymmdd)*				
	REPORTING PERIOD	20181031			THROUGH		20181031			
									T-10-14	

^{*} Indicates a required field

6 SCHEDULES	\boxtimes	Schedule ATX.7A - Pre-Election Report of Contributions
ATTACHED		
Check box for each form		Schedule ATX.7F - Pre-Election Report of Expenditures
attached		

AFFIDAVIT

By signature below, I certify that the Pre-Election Report filed herewith is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code, Section 2-2-29 for the reporting period indicated.

Signature of Affiant



Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

Itemize each contribution in Sections 1-3.
For additional contributions, click "Add Another Contribution Page" below.

* Indicates a required field

1			
CONTRIBUTOR	,		
NAME			
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*		
	NRP Holdings, Inc.		
CONTRIBUTOR ADDRESS	Contributor Address/ PO Box* 1228 Euclid Ave. Contributor City*	Contributor Apartme 400 Contributor State*	ent or Suite Number Contributor Zip Code*
AND EMPLOYER	Cleveland	он	44115
	Contributor Employer Per City Code 2-2-29(d), employer and occupation are required for	Contributor Occupat	
3	Contribution Date (yyyymmdd)*	(\$) Contribution Am	ount*
CONTRIBUTION	20181031	\$10,000.00	
DETAILS	In-Kind Contribution Description, if applicable		

Add Another Contribution Page



Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

Itemize each contribution in Sections 1-3.
For additional contributions, click "Add Another Contribution Page" below.

* Indicates a required field

CONTRIBUTOR NAME		
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*	
2	Calendar Holdings LLC	
	Contributor Address/ PO Box*	Contributor Apartment or Suite Number
CONTRIBUTOR	6411 Burleson Rd.	
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*
AND EMPLOYER	Austin	TX 78744
LIMPLOTEN	Contributor Employer	Contributor Occupation
	Per City Code 2-2-29(d), employer and occupation are required f	or individuals whose contribution is \$200 or more
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*
CONTRIBUTION DETAILS	20181031	\$474.70
DETAILS	In-Kind Contribution Description, if applicable	

Add Another Continue of Rese



Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

Itemize each contribution in Sections 1-3. For additional contributions, click "Add Another Contribution Page" below.

* Indicates a required field

1		
CONTRIBUTOR		
NAME		
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*	
	Alori Properties, Inc.	
2	Contributor Address/ PO Box*	Contributor Apartment or Suite Number
CONTRIBUTOR	509 Oakland Ave.	
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*
AND	Austin	TX 78705
EMPLOYER	Contributor Employer	Contributor Occupation
	Per City Code 2-2-29(d), employer and occupation are required for	or individuals whose contribution is \$200 or more
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*
CONTRIBUTION	20181031	\$1,000.00
DETAILS	In-Kind Contribution Description, if applicable	
	L	

Add Another Contribution Page



Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

Itemize each contribution in Sections 1-3.
For additional contributions, click "Add Another Contribution Page" below.

* Indicates a required field

CONTRIBUTOR NAME Contributor is an individual	Contributor Title Contributor First Name* Hon. Ann Organization Name or Contributor Last Name, as applicable* Kitchen	Contributor Suffix
CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* 2401 Briargrove Contributor City* Austin Contributor Employer City of Austin Per City Code 2-2-29(d), employer and occupation are required f	Contributor Apartment or Suite Number Contributor State* Contributor Zip Code* TX 78705 Contributor Occupation City Council Member for individuals whose contribution is \$200 or more
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20181031 In-Kind Contribution Description, if applicable	(\$) Contribution Amount* \$500.00

Add Amother Contribution Page



Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

Itemize each contribution in Sections 1-3.
For additional contributions, click "Add Another Contribution Page" below.

* Indicates a required field

1			
CONTRIBUTOR			
NAME			
Contributor is an individual	Organization Name or Contributor Last Name, as applicable *		
	Lighthouse Solar Austin		
CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* 2000 south 7th St. Contributor City* Austin Contributor Employer Per City Code 2-2-29(d), employer and occupation are required for	Contributor Apartme Contributor State* TX Contributor Occupate or individuals whose co	Contributor Zip Code* 78704
CONTRIBUTION	Contribution Date (yyyymmdd)*	(\$) Contribution Am	ount*
DETAILS	20181031	\$750.00	
SETALES.	In-Kind Contribution Description, if applicable		

Add Another Contribution Pege

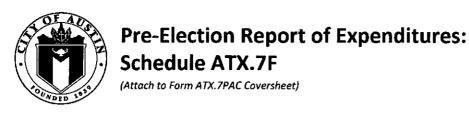


Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

1	PAYEE	Payee Title Payee First Name* James	
-	NAME	Organization Name or Payee Last Name, as applicable*	Payee Suffix
	Payee is an individual	McKinney	
2		Payee Address/ PO Box*	Payee Apartment or Suite Number
	PAYEE	6917 Langston Dr.	
	ADDRESS	Payee City*	Payee State* Payee Zip Code*
		Austin	TX 78723
3		Category*	(\$) Expenditure Amount*
	EXPENDITURE	Salaries/Wages/Contract labor	\$250.00
	DETAILS	Description (If Category is "Other")	Expenditure Date*
	·		20181031
		<u> </u>	



Itemize each expenditure in Sections 1-3.
For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1**: **Report of Direct Campaign Expenditures**

* Indicates a required field

Organization Name or Payee Last Name, as applicable*	
Emmis Communications	
Payee Address/ PO Box*	Payee Apartment or Suite Number
8309 N IH 35	
Payee City*	Payee State* Payee Zip Code*
Austin	TX 78753
Category*	(\$) Expenditure Amount*
Advertising Expense	\$5,000.00
Description (If Category is "Other")	Expenditure Date*
	20181031
	Emmis Communications Payee Address/ PO Box* 8309 N IH 35 Payee City* Austin Category* Advertising Expense



Pre-Election Report of Expenditures: Schedule ATX.7F

Expenditure

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form ATX.1: Report of Direct **Campaign Expenditures**

* Indicates a required field

1		Payee Title	Payee First Name*			
	PAYEE		Katie			
	NAME	Organization Na	me or Payee Last Name, as applicable*	Payee Suffix		
	Payee is an individual	Horstman				
2		Payee Address/	PO Box*	Payee Apartment of	or Suite Number	
PAYEE		3108 Helms St.				
	ADDRESS	Payee City*	_	Payee State*	Payee Zip Code*	Lummin
		Austin		тх	78705	
3		Category*		(\$) Expenditure Ar	mount*	
DETAILS		Salaries/Wages/Contract labor		\$100.00	\$100.00	
		Description (If Ca	ategory is "Other")	Expenditure Date*	*	
			1	20181031		
						Į.



Pre-Election Report of Expenditures: Schedule ATX.7F

Expenditure

Itemize each expenditure in Sections 1-3.

For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form ATX.1: Report of Direct **Campaign Expenditures**

* Indicates a required field

1 PAYEE NAME	Payee Title Payee First Name* Rachel Organization Name or Payee Last Name, as applicable*	Payee Suffix
Payee is an individual	Langan	
2 PAYEE ADDRESS	Payee Address/ PO Box* 2505 Longview St. #428 Payee City*	Payee Apartment or Suite Number Payee State* Payee Zip Code*
3	Austin	TX [78705
EXPENDITURE	Category*	(\$) Expenditure Amount*
DETAILS	Salaries/Wages/Contract labor Description (If Category is "Other")	\$100.00 Expenditure Date* 20181031



Pre-Election Report of Expenditures: Schedule ATX.7F

Expenditure

(Attach to Form ATX.7PAC Coversheet)

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1:** Report of Direct Campaign Expenditures

* Indicates a required field

1 PAYEE	Payee Title Payee First Name* Majd	
NAME	Organization Name or Payee Last Name, as applicable*	Payee Suffix
Payee is an individual	Al-Jadaa	
PAYEE ADDRESS	Payee Address/ PO Box* 709 W. 22nd St. #310 Payee City* Austin	Payee Apartment or Suite Number Payee State* Payee Zip Code* TX 78705
3 EXPENDITURE DETAILS	Category* Salaries/Wages/Contract labor Description (If Category is "Other")	(\$) Expenditure Amount* \$100.00 Expenditure Date* 20181031

Add Another Experience Perce



Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1:** Report of Direct Campaign Expenditures

* Indicates a required field

G					
1	Payee Title	Payee First Name*			
PAYEE		Dana			
NAME	Organization Na	me or Payee Last Name, as applicable*	Payee Suffix		
Payee is an individual	Waller				
3					
2	Payee Address/ PO Box* 2010 A Kenneth Ave.		Payee Apartment	or Suite Number	
PAYEE					
ADDRESS	Payee City*		Payee State*	Payee Zip Code*	
	Austin		тх	78741	

3	Category*		(\$) Expenditure A	mount*	
EXPENDITURE	Salaries/Wages/Contract labor		\$100.00	\$100.00	
DETAILS	Description (If Category is "Other")		Expenditure Date	Expenditure Date*	
•			20181031		
	I				

Add Another Lycardium Page



Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

1 PAYEE NAME	Payee Title Payee First Name* Emma Organization Name or Payee Last Name, as applicable*	Payee Suffix
Payee is an individual	Boardman-Lawson	
PAYEE ADDRESS	Payee Address/ PO Box* 1017 E. 44th St. Payee City* Austin	Payee Apartment or Suite Number Payee State* Payee Zip Code* TX 78751
3 EXPENDITURE DETAILS	Category* Salaries/Wages/Contract labor Description (If Category is "Other")	(\$) Expenditure Amount* \$100.00 Expenditure Date* 20181031

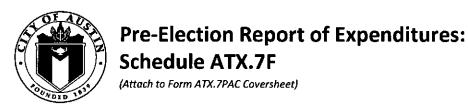


Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

1 PAYEE	Payee Title Payee First Name*			
NAME	Organization Name or Payee Last Name, as applicable*	Payee Suffix		
Payee is an individual	Jackson			
2	Payee Address/ PO Box*	Payee Apartmen	t or Suite Number	
PAYEE	2215 Town Lake Circle #137			
ADDRESS	Payee City*	Payee State*	Payee Zip Code*	
	Austin	тх	78741	
3	Category*	(\$) Expenditure	Amount*	
EXPENDITURE	Salaries/Wages/Contract labor	\$100.00		
DETAILS	Description (If Category is "Other")	Expenditure Date	Expenditure Date*	
		20181031		



Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1**: **Report of Direct Campaign Expenditures**

* Indicates a required field

1	Payee Title Payee First Name*		
PAYEE	Juliet		
NAME	Organization Name or Payee Last Name, as applicable*	Payee Suffix	
Payee is an individual	Suarez		
2	Payee Address/ PO Box*	Payee Apartment or Suite Number	
PAYEE	2323 San Antonio St. #1723		
ADDRESS	Payee City*	Payee State* Payee Zip Code*	
	Austin	TX 78705	
3	Category*	(\$) Expenditure Amount*	
EXPENDITURE	Salaries/Wages/Contract labor	\$100.00 Expenditure Date*	
DETAILS	Description (If Category is "Other")		
		20181031	



Pre-Election Report of Expenditures: Schedule ATX.7F

Expenditure

(Attach to Form ATX.7PAC Coversheet)

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1:** Report of Direct Campaign Expenditures

* Indicates a required field

L				
	PAYEE			
	NAME	Organization Name or Payee Last Name, as applicable*		
[Payee is an individual	Frost Bank		
2		Payee Address/ PO Box*	Payee Apartment or	Suite Number
	PAYEE	1206 W. 38th St., Suite 1101		
	ADDRESS	Payee City*	Payee State*	Payee Zip Code*
		Austin	тх	78705
3	/	Category*	(\$) Expenditure Ame	ount*
	EXPENDITURE	Accounting/Banking	\$5.00	·
DETAILS		Description (If Category is "Other")	Expenditure Date*	
			20181031	
		I and the second		



Pre-Election Report of Expenditures: Schedule ATX.7F

Expenditure

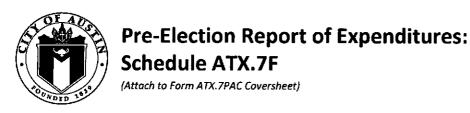
/ (Attach to Form ATX.7PAC Coversheet)

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1**: **Report of Direct Campaign Expenditures**

* Indicates a required field

4			10.		
1					
PA	YEE				
N.A	AME	Organization Name or Payee Last Name, as applicable*			
Payee	is an individual	Texas Secretary of State			
2		Payee Address/ PO Box*	Payee Apartment o	or Suite Number	
PA	YEE	1019 Brazos St			
ADD	DRESS	Payee City*	Payee State*	Payee Zip Code*	
		Austin	TX	78701	
3		Category*	(\$) Expenditure An	nount*	
EXPENDITURE		Solicitation/Fundraising Expense	\$1.03		
DET	AILS	Description (If Category is "Other")	Expenditure Date*		
			20181031		



Itemize each expenditure in Sections 1-3.
For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

PAYEE NAME Payee is an individual	Organization Name or Payee Last Name, as applicable*		
PAYEE ADDRESS	Payee Address/ PO Box* Payee City*	Payee Apartment Payee State*	or Suite Number Payee Zip Code*
3 EXPENDITURE DETAILS	Category* Description (If Category is "Other")	(\$) Expenditure A Expenditure Date	