

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090003		2 Total pages filed: 59	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Alison		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/05/2020		
	NICKNAME LAST SUFFIX Alter				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 4401 Bellvue Ave Austin, TX 78756			Date Hand-delivered or Date Postmarked	
				Receipt #	Amount
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Dr. Jeremi				
	NICKNAME LAST SUFFIX Suri				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4401 Bellvue Ave Austin, TX 78756				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 323-6245				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/01/2020 09/24/2020				
10 ELECTION	ELECTION DATE Month Day Year 11/03/2020		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME	Alter, Alison	14 Filer ID	(Ethics Commission Filers)
		00090003	

15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 36,480.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 6,470.95
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 150,216.11
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,500.00

17 AFFADAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Alison Alter

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Alter, Alison		19 Filer ID (Ethics Commission Filers) 00090003
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 36,480.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 6,470.95
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 0.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/51 Rpt: 4/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/22/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aaronson, Lee <hr/> 6 Contributor address; City; State; Zip Code 3710 Meadowbank Dr Austin, TX 78703	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Lacks		9 Employer (See Instructions) Ceo
Date 08/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abel, Andrea <hr/> Contributor address; City; State; Zip Code 4000 N Hills Drive Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Farmshare Austin		Employer (See Instructions) Executive Director
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abramson, Jeffrey B. <hr/> Contributor address; City; State; Zip Code 5813 Buckpasser Cove Austin, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) University Of Texas		Employer (See Instructions) Professor
Date 07/26/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Carol <hr/> Contributor address; City; State; Zip Code 2905 Glenview Avenue Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Cristina <hr/> Contributor address; City; State; Zip Code 5921 Mount Bonnell Rd. Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Writer

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/51 Rpt: 5/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adkinson, Dane 6 Contributor address; City; State; Zip Code 1401 W 39 1/2 St Austin, TX 78756	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert, David Contributor address; City; State; Zip Code 1101 Grove Blvd. #703 Austin, TX 78741	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Austin Community College		Employer (See Instructions) Professor
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Chris Contributor address; City; State; Zip Code 1406 W. 39TH 1/2 ST. AUSTIN, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Architect
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Matt Contributor address; City; State; Zip Code 8126 Bottlebrush Drive Austin, TX 78750	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Coffee Shark
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Erin Contributor address; City; State; Zip Code 5501 Balcones Drive Suite A-220 Austin, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Freelancer		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/51 Rpt: 6/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Archer, Pamela <hr/> 6 Contributor address; City; State; Zip Code 4103 ROSEDALE AVE Austin, TX 78756	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Self-Employed
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arechiga, Jacob <hr/> Contributor address; City; State; Zip Code 4300 Burney Dr. Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Duane Morris LLP		Employer (See Instructions) Attorney
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arsers, Emily <hr/> Contributor address; City; State; Zip Code 8020 Bottlebrush Dr Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Ut Health		Employer (See Instructions) Assistant Professor
Date 08/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Artman, Russell <hr/> Contributor address; City; State; Zip Code 7606 Bellflower CV Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Jese & Rgtp Real Estate		Employer (See Instructions) Real Estate Developer
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashworth, Karen <hr/> Contributor address; City; State; Zip Code 8709 Oak Mountain Cir Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Barnes Lipscomb Stewart & Ott, PLLC		Employer (See Instructions) Attorney

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/51 Rpt: 7/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/04/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ausley, Tom <hr/> 6 Contributor address; City; State; Zip Code 3707 Laurel Ledge Ln Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Goranson Bain Ausley Family Lawyers		9 Employer (See Instructions) Attorney
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Travis County Emergency Medical Services Employee Pac <hr/> Contributor address; City; State; Zip Code 5817 Wilcab Rd Austin, TX 78721	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Debra <hr/> Contributor address; City; State; Zip Code 6400 Deer Hollow Lane Austin, TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhatt, Bhuvanesh <hr/> Contributor address; City; State; Zip Code 3600 Greystone Drive #605 Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Wolfram Research		Employer (See Instructions) Software Engineer
Date 09/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bini, Daniela <hr/> Contributor address; City; State; Zip Code 2205 WEST 11TH AUSTIN, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) University Of Texas, Austin		Employer (See Instructions) Professor

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/51 Rpt: 8/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blech, Scott <hr/> 6 Contributor address; City; State; Zip Code 3703 Timson Court Austin, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Nonprofit Volunteer
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blum, Roy <hr/> Contributor address; City; State; Zip Code 9225 Simmons Road Austin, TX 78759	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bode, Brooke <hr/> Contributor address; City; State; Zip Code 4110 Fairmount Street Dallas, TX 75219	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mid America Mortgage Inc		Employer (See Instructions) Marketing Director
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braden, Al <hr/> Contributor address; City; State; Zip Code 2810 W Fresco Dr Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braden, Al <hr/> Contributor address; City; State; Zip Code 2810 W FRESCO DR AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/51 Rpt: 9/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 07/07/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brauer, Patricia <hr/> 6 Contributor address; City; State; Zip Code 8304 Appalachian Dr Austin, TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Librarian
Date 07/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brimer, Richard <hr/> Contributor address; City; State; Zip Code 6417 Yaupon Drive Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brodnax, Pat <hr/> Contributor address; City; State; Zip Code 1105 W Annie St Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Save Our Springs Alliance		Employer (See Instructions) Managing Director
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, April <hr/> Contributor address; City; State; Zip Code 1500 Crossing Place Apt 115 Austin, TX 78741	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Communications & Policy Advisor		Employer (See Instructions) City Of Austin
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Mark And Joyce <hr/> Contributor address; City; State; Zip Code 4012 Rosedale Ave Austin, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/51 Rpt: 10/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/22/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Sue 6 Contributor address; City; State; Zip Code 2912 Nottingham - Houston, TX 77005	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Executive Coach		9 Employer (See Instructions) Self
Date 09/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Suzanne Contributor address; City; State; Zip Code 1500 W 24th St Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Law Office Of Suzanne Bryant		Employer (See Instructions) Attorney
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bumbulis, Charlotte Contributor address; City; State; Zip Code 2101 Rivers edge way 17 Austin, TX 78741	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Careerplug		Employer (See Instructions) Client Success
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Cecelia Contributor address; City; State; Zip Code 6500 Santolina Cv Austin, TX 78731	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Na		Employer (See Instructions) Retired
Date 08/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chang, Elizabeth Contributor address; City; State; Zip Code 10805 Broken Brook Cove Austin, TX 78726	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Realty One Group Prosper		Employer (See Instructions) Realtor

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/51 Rpt: 11/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/13/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chao, Angela 6 Contributor address; City; State; Zip Code 7316 Fabion Dr Austin, TX 78759	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Dell		9 Employer (See Instructions) Engr
Date 08/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chizek li, Lewis Contributor address; City; State; Zip Code 3643 Turkey Creek Dr - Austin, TX 78730	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choate, Christine Contributor address; City; State; Zip Code 9606 N Mopac Expy Suite 150 Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Horizon Realty		Employer (See Instructions) Owner Of Real Estate Brokerage
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Kate Contributor address; City; State; Zip Code 3306 Bonnie Road Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Margot Contributor address; City; State; Zip Code 5106 Evergreen Ct Austin, TX 78731	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/51 Rpt: 12/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 08/27/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Closmann, Philip <hr/> 6 Contributor address; City; State; Zip Code 4200 Jackson Ave Apt 5025 Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cofer, George <hr/> Contributor address; City; State; Zip Code 3306 Gentry Drive Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Hill Country Conservancy		Employer (See Instructions) Ceo
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cofer, Rick <hr/> Contributor address; City; State; Zip Code 1621 Enfield Road A Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Cofer & Connelly		Employer (See Instructions) Lawyer
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffin, Judith <hr/> Contributor address; City; State; Zip Code 3206 Greenlee Drive Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Ut Austin		Employer (See Instructions) Professor
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffin, Judith <hr/> Contributor address; City; State; Zip Code 3206 Greenlee Drive Austin, TX 78703	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Ut Austin		Employer (See Instructions) Professor

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/51 Rpt: 13/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 07/26/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Elton <hr/> 6 Contributor address; City; State; Zip Code 5014 Lansing Dr. Austin, TX 78745	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Medical Editor/Virologist
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conway, Mark <hr/> Contributor address; City; State; Zip Code 3507 Cloudy Ridge Road Austin, TX 78734	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Consultant
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooksey, Frank <hr/> Contributor address; City; State; Zip Code 2208 Matthews Drive Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Lawyer
Date 07/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coon, Samuel <hr/> Contributor address; City; State; Zip Code 3939 bee caves ste C100 w lake city, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Southern Methodist University		Employer (See Instructions) Student
Date 07/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Lanetta <hr/> Contributor address; City; State; Zip Code 5008 Eilers Ave Austin, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/51 Rpt: 14/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 08/22/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Lanetta <hr/> 6 Contributor address; City; State; Zip Code 5008 Eilers Ave Austin, TX 78751	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Atty
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Costello, Tj <hr/> Contributor address; City; State; Zip Code 1411 Gracy Farms Lane #126 AUSTIN, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) State Of Texas		Employer (See Instructions) Economist
Date 08/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtois, Amity <hr/> Contributor address; City; State; Zip Code 2643 W 45 ST AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Give Realty		Employer (See Instructions) Real Estate Broker
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crago Blanton, Catherine <hr/> Contributor address; City; State; Zip Code 1725 W. 10th Street Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Housing Authority Of The City Of Austin		Employer (See Instructions) Head Of Strategic Initiatives
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Kenneth <hr/> Contributor address; City; State; Zip Code 7100 Whispering Oaks Dr Austin, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) City Of Austin		Employer (See Instructions) Executive Assistant

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/51 Rpt: 15/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 07/31/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Richard <hr/> 6 Contributor address; City; State; Zip Code 1419 Preston Avenue Austin, TX 78703	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Attorney
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cumberbatch, Jennifer <hr/> Contributor address; City; State; Zip Code 831 east 38th street Austin, TX 78705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Full Measure		Employer (See Instructions) Pastoral Counselor
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cummings, Craig <hr/> Contributor address; City; State; Zip Code 3300 Park Hills Dr Austin, TX 78746	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Moonshots Capital		Employer (See Instructions) Home
Date 08/27/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cummings, Lawton <hr/> Contributor address; City; State; Zip Code 3300 Park Hills Drive Rollingwood, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Notley		Employer (See Instructions) Partner
Date 08/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dailey, Robert <hr/> Contributor address; City; State; Zip Code PO Box 200068 Austin, TX 78720	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Engineer

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/51 Rpt: 16/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 07/16/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danish, Nasimullah <hr/> 6 Contributor address; City; State; Zip Code 8023 cypress pass San Antonio, TX 78240	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Self
Date 07/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dasgupta, Sumit <hr/> Contributor address; City; State; Zip Code 8900 Bluegrass Drive Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Na
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Destefano, Deborah <hr/> Contributor address; City; State; Zip Code 4114 Burnet Rd. Austin, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Librarian
Date 09/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Destefano, Deborah <hr/> Contributor address; City; State; Zip Code 4114 Burnet Rd. Austin, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Librarian
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diehl, Randy <hr/> Contributor address; City; State; Zip Code 9504 Topridge Dr. Austin, TX 78750	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Professor

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/51 Rpt: 17/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobbs, David <hr/> 6 Contributor address; City; State; Zip Code 9702 Swansons Ranch Road Austin, TX 78748	7 Amount of Contribution (\$) \$103.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dochan, Sandy <hr/> Contributor address; City; State; Zip Code 5010 North Rim Drive Austin, TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dow, Lisa <hr/> Contributor address; City; State; Zip Code 6109 Shadow Mountain Drive Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Community Volunteer
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmonds, Brendan <hr/> Contributor address; City; State; Zip Code 3203 MEREDITH STREET AUSTIN, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Metric Point Capital		Employer (See Instructions) Finance
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmonds, Erinn <hr/> Contributor address; City; State; Zip Code 3204 MEREDITH STREET AUSTIN, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/51 Rpt: 18/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/03/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, George <hr/> 6 Contributor address; City; State; Zip Code 2203 Meadowbrook Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired Pediatrician
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, George <hr/> Contributor address; City; State; Zip Code 2203 Meadowbrook Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired Pediatrician
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Kerry <hr/> Contributor address; City; State; Zip Code 4407 Bellvue Ave Austin, TX 78756	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Dell Technologies		Employer (See Instructions) Sr Director
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eisenman, Iris <hr/> Contributor address; City; State; Zip Code 50862 Post Road Granger, IN 46530	Amount of Contribution (\$) \$218.00
Principal occupation / Job title (See Instructions) University Of Notre Dame		Employer (See Instructions) Faculty
Date 09/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epstein, Robert <hr/> Contributor address; City; State; Zip Code 5000 Plaza on the Lake Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/51 Rpt: 19/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/05/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ersig, Jeff <hr/> 6 Contributor address; City; State; Zip Code 3206 Bryker Drive Austin, TX 78703	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Mangold Anker Phillips PLLC		9 Employer (See Instructions) Cpa
Date 07/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eskridge, Laurel <hr/> Contributor address; City; State; Zip Code 4213 Bellvue Ave Austin, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) St. Stephen'S Episcopal School		Employer (See Instructions) Teacher
Date 07/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fister, Joe <hr/> Contributor address; City; State; Zip Code 8400-A Greenflint Ln Austin, TX 78759	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Solution Architect		Employer (See Instructions) Go Moxie
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forman, Bettie <hr/> Contributor address; City; State; Zip Code 6421 Williams Ridge Way Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Bettie Forman
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Virginia <hr/> Contributor address; City; State; Zip Code 1902 Forestglade Dr Austin, TX 78745	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/51 Rpt: 20/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 08/13/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Russell <hr/> 6 Contributor address; City; State; Zip Code 507 LOCKHART DRIVE AUSTIN, TX 78704	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Russell <hr/> Contributor address; City; State; Zip Code 507 Lockhart Dr Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frede, Martha <hr/> Contributor address; City; State; Zip Code 4200 Jackson Ave. #5016 austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuentes, Francisco <hr/> Contributor address; City; State; Zip Code 6502 Alasan Cove Austin, TX 78730	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Architect
Date 07/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamble, Chris <hr/> Contributor address; City; State; Zip Code P.O. Box 28344 Austin, TX 78755	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Ccg		Employer (See Instructions) Consultant

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/51 Rpt: 21/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrard, Virginia <hr/> 6 Contributor address; City; State; Zip Code 1303 W. 42nd. St. 512-426-7229 Austin, TX 78756	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Ut Austin		9 Employer (See Instructions) Professor
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ghatalia, Ashwin <hr/> Contributor address; City; State; Zip Code 6202 Cape Coral Dr - Austin, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbons, Heidi <hr/> Contributor address; City; State; Zip Code 613 Hearn St. Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) Consultant
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gill, Ramanjeet <hr/> Contributor address; City; State; Zip Code 4308 Bellvue Avenue AUSTIN, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sumpter & Gonzalez		Employer (See Instructions) Attorney
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goll, Kurt <hr/> Contributor address; City; State; Zip Code 1925 Cypress Pt W - Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Jci Residential

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/51 Rpt: 22/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/21/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goll, Michelle <hr/> 6 Contributor address; City; State; Zip Code 1925 Cypress Pt W - Austin, TX 78746	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Interior Designer		9 Employer (See Instructions) Asap Interiors
Date 09/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Michelle <hr/> Contributor address; City; State; Zip Code 4918 ELIZABETH JANE CT AUSTIN, TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Mom
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg, Betsy <hr/> Contributor address; City; State; Zip Code 3009 Washington Sq Austin, TX 78705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) University Of Texas At Austin		Employer (See Instructions) Faculty
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregorcyk, David <hr/> Contributor address; City; State; Zip Code 4205 Shoalwood - Austin, TX 78756	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) General Counsel		Employer (See Instructions) Journeyman Construction
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregorcyk, Jennifer <hr/> Contributor address; City; State; Zip Code 4205 Shoalwood - Austin, TX 78756	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Apron Food Pr		Employer (See Instructions) Managing Partner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/51 Rpt: 23/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haddad, Sam <hr/> 6 Contributor address; City; State; Zip Code 4707 Highland Terrace Austin, TX 78731	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Self-Employed		9 Employer (See Instructions) Self-Employed
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halley, Shannon <hr/> Contributor address; City; State; Zip Code 1017 County Rd 130 Burnet, TX 78611	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) City Of Austin		Employer (See Instructions) Policy Advisor
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halpin, Marilyn <hr/> Contributor address; City; State; Zip Code 1504 W 29th St Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Robert T Halpin, Inc		Employer (See Instructions) President
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hampton, Emma <hr/> Contributor address; City; State; Zip Code 5950 Highland Hills Drive Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Former University Of Texas Senior Lecturer???biology
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauwert, Nico <hr/> Contributor address; City; State; Zip Code 2403 Bahama Rd Austin, TX 78733	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Austin Water		Employer (See Instructions) Program Manager

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/51 Rpt: 24/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecker, Marvin <hr/> 6 Contributor address; City; State; Zip Code 1319 Wilson Heights Dr Austin, TX 78746	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedrick, Madeleine <hr/> Contributor address; City; State; Zip Code 2902 Bridle Path Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Na		Employer (See Instructions) House Manager
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedrick, Tom <hr/> Contributor address; City; State; Zip Code 2902 Bridle Path Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Dillon Joyce Ltd		Employer (See Instructions) Investor
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hemingson, Carol <hr/> Contributor address; City; State; Zip Code 2509 West 45th St Austin, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Laying Around The House
Date 07/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, George <hr/> Contributor address; City; State; Zip Code 2303 Sunny Slope Dr Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/51 Rpt: 25/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/22/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hornaday, Walt <hr/> 6 Contributor address; City; State; Zip Code 2401 Woodmont Avenue Austin, TX 78703	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Big Wind Llc		9 Employer (See Instructions) Executive
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins, Kimberly <hr/> Contributor address; City; State; Zip Code 4041 ENCLAVE MESA CIR AUSTIN, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Pet Sitter
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Humphreys, Stephanie <hr/> Contributor address; City; State; Zip Code 4001 Ridgelea Dr Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Common Good		Employer (See Instructions) Food Pantry Director
Date 07/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurst, Melissa <hr/> Contributor address; City; State; Zip Code 1411 Gracy Farms Lane 114 Austin, TX 78758	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Rifeline		Employer (See Instructions) Vice President
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurt, Brett <hr/> Contributor address; City; State; Zip Code 9102 Atwater Cove Austin, TX 78733	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Data.World		Employer (See Instructions) Ceo

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/51 Rpt: 26/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 07/05/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Christopher <hr/> 6 Contributor address; City; State; Zip Code 1952 Gibraltar - San Marcos, TX 78666	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) Student
Date 08/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Hannah <hr/> Contributor address; City; State; Zip Code 2800 Waymaker way Unit 54 Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 08/26/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobs, Cher <hr/> Contributor address; City; State; Zip Code PO Box 12008 Dallas, TX 75225	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Meeting Planner
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamroz, David <hr/> Contributor address; City; State; Zip Code 11904 Knights Brg - Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Journeyman Construction		Employer (See Instructions) Senior Estimator
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jave, Raquel <hr/> Contributor address; City; State; Zip Code 11904 Knights Brg - Austin, TX 78759	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Adc Clinic		Employer (See Instructions) Cytotechnologist

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/51 Rpt: 27/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 08/19/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaworski, Joseph <hr/> 6 Contributor address; City; State; Zip Code 1028 Winnie St. Galveston, TX 77550	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Jaworski Law Firm		9 Employer (See Instructions) Attorney
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeanes, Ryder <hr/> Contributor address; City; State; Zip Code 2629 W. 45th Street Austin, TX 78731	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Real Estate
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Bryan <hr/> Contributor address; City; State; Zip Code 4008 Eagles Landing Cove AUstin, TX 78735	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Auctane		Employer (See Instructions) Coo
Date 08/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaiser-Cross, Sarah <hr/> Contributor address; City; State; Zip Code 201 W 77th 7F New York, NY 10024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Hsbc		Employer (See Instructions) Financial Crime Risk
Date 09/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kang, Sung <hr/> Contributor address; City; State; Zip Code 5903 Pecanwood Ln AUSTIN, TX 78749	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Nwl Insurance Company		Employer (See Instructions) It

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/51 Rpt: 28/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 08/26/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Susan <hr/> 6 Contributor address; City; State; Zip Code 8104 Cardin Drive Austin, TX 78759	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keohane, Cynthia <hr/> Contributor address; City; State; Zip Code 5702 WYNONA AVE. AUSTIN, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Cb Keohane Associates		Employer (See Instructions) Auditor
Date 08/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khalsa, Gurudhan <hr/> Contributor address; City; State; Zip Code 9600 Glenlake Dr. Austin, TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Dahlicious Llc		Employer (See Instructions) Sales Manager
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khalsa, Gurudhan <hr/> Contributor address; City; State; Zip Code 9600 Glenlake Dr. Austin, TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Dahlicious Llc		Employer (See Instructions) Sales Manager
Date 07/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kidd, Madelyn <hr/> Contributor address; City; State; Zip Code 514 E 38th 1/2 St Austin, TX 78751	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/51 Rpt: 29/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/02/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim, Kyongmee <hr/> 6 Contributor address; City; State; Zip Code 2800 Waymaker way Unit 54 Austin, TX 78746	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Slogood Ltd
Date 07/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleinman, Michael <hr/> Contributor address; City; State; Zip Code box 13549 austin, TX 78711	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Mlk Llc		Employer (See Instructions) Retailer
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kothare, Meeta <hr/> Contributor address; City; State; Zip Code 7204 Fabion Drive AUSTIN, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) University Of Texas At Austin		Employer (See Instructions) Adj. Professor
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kumar, Hema <hr/> Contributor address; City; State; Zip Code 1628 Westlake Dr - Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Secretary		Employer (See Instructions) Journeyman Construction
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kumar, Sam <hr/> Contributor address; City; State; Zip Code 1628 Westlake Dr - Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Ceo		Employer (See Instructions) Jci Residential

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/51 Rpt: 30/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/16/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kusey, Douglas <hr/> 6 Contributor address; City; State; Zip Code 4106 Tablerock Dr. Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lake, Carole <hr/> Contributor address; City; State; Zip Code 4003 Edgefield Ct Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lake, Carole <hr/> Contributor address; City; State; Zip Code 4003 Edgefield Ct Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larkin, Randall <hr/> Contributor address; City; State; Zip Code 6001 SATSUMA CV AUSTIN, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Consultant
Date 07/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehman, Jeanine <hr/> Contributor address; City; State; Zip Code PO Box 202211 Austin, TX 78720	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Law Offices Of Jeanine Lehman Pc		Employer (See Instructions) Attorney

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/51 Rpt: 31/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/22/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levinson, Cynthia <hr/> 6 Contributor address; City; State; Zip Code 3410 Windsor Rd. Austin, TX 78703	7 Amount of Contribution (\$) \$130.00
8 Principal occupation / Job title (See Instructions) Na		9 Employer (See Instructions) Author
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd Dogget for U.S. Congress Campaign <hr/> Contributor address; City; State; Zip Code P.O. Box 5843 - Austin, TX 78763	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Robert <hr/> Contributor address; City; State; Zip Code 4710 Spicewood Springs Rd Unit 285 Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macken, Patrick <hr/> Contributor address; City; State; Zip Code 905 Newman Drive Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markman, Arthur <hr/> Contributor address; City; State; Zip Code 2005 Exposition Blvd. Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) University Of Texas		Employer (See Instructions) Professor

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/51 Rpt: 32/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Matthew <hr/> 6 Contributor address; City; State; Zip Code 6810 Deatonhill Drive 3101 Austin, TX 78745	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Journeyman Group		9 Employer (See Instructions) Financial Controller
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Sarah <hr/> Contributor address; City; State; Zip Code 6810 Deatonhill Drive 3101 Austin, TX 78745	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Stay At Home Mom		Employer (See Instructions) Self Employed
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marz, Janet <hr/> Contributor address; City; State; Zip Code 7901 Moritz Lane Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Teacher
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Tom <hr/> Contributor address; City; State; Zip Code 4504 Tortuga Cove Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcanelly, Mary <hr/> Contributor address; City; State; Zip Code 8303 APPALACHIAN DR AUSTIN, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/51 Rpt: 33/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 08/18/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Charlotte 6 Contributor address; City; State; Zip Code 3202 Sunny Lane - Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Texas Riogrande Legal Aid		9 Employer (See Instructions) Development Coordinator
Date 08/26/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mchorse, Tom And Kay Contributor address; City; State; Zip Code 5503 Ridge Oak Drive Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Physician
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mchorse, Tom And Kay Contributor address; City; State; Zip Code 5503 Ridge Oak Drive Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Physician
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mclinden, Karen Contributor address; City; State; Zip Code 4401 Ramsey Ave Austin, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medlock, Patrick Contributor address; City; State; Zip Code 1507 West 30th St - Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Kok Shooting Star		Employer (See Instructions) Manager

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/51 Rpt: 34/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meltzer, Linda <hr/> 6 Contributor address; City; State; Zip Code 6334 Yaupon Driver Austin, TX 78759	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Attorney
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mickenberg, Julia <hr/> Contributor address; City; State; Zip Code 5113 Woodview Avenue Austin, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) University Of Texas		Employer (See Instructions) Professor
Date 09/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, Peyton <hr/> Contributor address; City; State; Zip Code 4510 Shoaldwood Ave - Austin, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milch, Jennifer <hr/> Contributor address; City; State; Zip Code 4315 Bellvue Avenue Austin, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Archer Systems		Employer (See Instructions) Head Of Data
Date 09/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milman, Wendy <hr/> Contributor address; City; State; Zip Code 6409 Williams Ridge Way austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Appraiser

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/51 Rpt: 35/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 08/17/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mintz, David 6 Contributor address; City; State; Zip Code 2705 Northland Drive Austin, TX 78756	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Tx Apt Assn		9 Employer (See Instructions) Govt Affairs
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Kirk Contributor address; City; State; Zip Code PO Box 4023 Austin, TX 78765	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Securities Investment
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Sylvia Contributor address; City; State; Zip Code PO Box 4023 Austin, TX 78765	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Homemaker
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moeser, Bob Contributor address; City; State; Zip Code 4705 Greystone Drive Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mok, Amy Contributor address; City; State; Zip Code 6301 Cat Mountain Cove Austin, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Asian American Cultural Center		Employer (See Instructions) President & Ceo

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/51 Rpt: 36/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 08/18/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Jennifer <hr/> 6 Contributor address; City; State; Zip Code 4406 Bellvue Avenue AUSTIN, TX 78756	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Baker Botts		9 Employer (See Instructions) Lawyer
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Tina <hr/> Contributor address; City; State; Zip Code 1507 West 30th St. - Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Office Depot		Employer (See Instructions) Account Manager
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Shirley <hr/> Contributor address; City; State; Zip Code 4003 Knollwood Dr Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Txdot		Employer (See Instructions) Environmental Supervisor
Date 07/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olikara, Steven <hr/> Contributor address; City; State; Zip Code 916 E State Street, Apt 602 Milwaukee, WI 53202	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Millennial Action Project		Employer (See Instructions) Entrepreneur
Date 08/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olmstead, Todd <hr/> Contributor address; City; State; Zip Code 3204 Kerbey Ln Austin, TX 78703	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Ut-Austin		Employer (See Instructions) Associate Professor

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/51 Rpt: 37/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paban, Sonia <hr/> 6 Contributor address; City; State; Zip Code 5300 Valburn Circle Austin, TX 78731	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Ut-Austin		9 Employer (See Instructions) Professor
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Panak, Kathy And Allen <hr/> Contributor address; City; State; Zip Code 4409 Bellvue - Austin, TX 78756	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Architect/Project Manager		Employer (See Instructions) TFC
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Brad <hr/> Contributor address; City; State; Zip Code 3706 Greystone Drive Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pedersen, Craig <hr/> Contributor address; City; State; Zip Code 2025 E 7th St Apt 320 Austin, TX 78702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) University Of Texas		Employer (See Instructions) Instructor
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peticolas, Anne <hr/> Contributor address; City; State; Zip Code 5730 Abilene Trl Austin, TX 78749	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/51 Rpt: 38/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickhardt, Irene <hr/> 6 Contributor address; City; State; Zip Code 3311 Bryker Dr - Austin, TX 78703	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pietsch, Sara <hr/> Contributor address; City; State; Zip Code 3121 Hemphill Park Austin, TX 78705	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired Librarian
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pittman, Cherrieh <hr/> Contributor address; City; State; Zip Code 1730 Harliquin Run UNIT 18-A AUSTIN, TX 78758	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Clinical Trial Volunteer
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Popinsky, Sydelle <hr/> Contributor address; City; State; Zip Code 4411 Spicewood Springs RD 2201 Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pozen, Harriett <hr/> Contributor address; City; State; Zip Code 4711 Spicewood Springs Rd Unit 286 Austin, TX 78759	Amount of Contribution (\$) \$68.00
Principal occupation / Job title (See Instructions) Shalom Austin		Employer (See Instructions) Generations Director

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/51 Rpt: 39/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 07/28/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purnell, Neva <hr/> 6 Contributor address; City; State; Zip Code 3014 Windsor Rd Austin, TX 78703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purnell, Neva <hr/> Contributor address; City; State; Zip Code 3014 Windsor Rd Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reardon, Julie <hr/> Contributor address; City; State; Zip Code 3506 Cloudy Ridge Road Austin, TX 78734	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Lake Travis Integrative Medicine		Employer (See Instructions) Physician
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Katherine <hr/> Contributor address; City; State; Zip Code 5804 Trailridge Circle AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Software Engineer
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riddell, Joe <hr/> Contributor address; City; State; Zip Code PO Box 41898 Austin, TX 78704	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Mostly Retired Attorney

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/51 Rpt: 40/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 07/15/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jack <hr/> 6 Contributor address; City; State; Zip Code 7702 Pleasant Meadow Circle Austin, TX 78731	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Consultant
Date 07/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robshaw, David <hr/> Contributor address; City; State; Zip Code 2600 Via Fortuna, ste 260 Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Aic Ventures		Employer (See Instructions) Ceo
Date 07/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robshaw, Rhonda <hr/> Contributor address; City; State; Zip Code 2600 Via Fortuna, ste 260 Austin, TX 78746	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roehm, Eric <hr/> Contributor address; City; State; Zip Code 7507 Parkview Circle Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roesle, Linda <hr/> Contributor address; City; State; Zip Code 2900 Enfield Rd - Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/51 Rpt: 41/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 08/20/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogier, Victoria <hr/> 6 Contributor address; City; State; Zip Code 9720 Sidonia Rd. Tell City, IN 47586	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rothe, Gail <hr/> Contributor address; City; State; Zip Code 1705 Margaret Street Austin, TX 78704 Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rush, Barbara <hr/> Contributor address; City; State; Zip Code 9819 Childress Dr Austin, TX 78753	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Travis County		Employer (See Instructions) Chief Of Staff
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saldana, Paul <hr/> Contributor address; City; State; Zip Code 1612 Melissa Oaks Lane Austin, TX 78744	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Saldana Public Relations		Employer (See Instructions) Public Relations Consultant
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salmanson, Mark <hr/> Contributor address; City; State; Zip Code 6816 Marbrys Ridge Cove Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/51 Rpt: 42/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 08/25/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayers, Scott <hr/> 6 Contributor address; City; State; Zip Code 2542 Scenic Drive Austin, TX 78703	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Coore & Crenshaw		9 Employer (See Instructions) Architect/Partner
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schindel, Michael <hr/> Contributor address; City; State; Zip Code 6702 W. Courtyard Dr. Austin, TX 78730	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Adc		Employer (See Instructions) Physician
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schindel, Sandy <hr/> Contributor address; City; State; Zip Code 6703 W. Courtyard Dr. Austin, TX 78730	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schrags, Steven <hr/> Contributor address; City; State; Zip Code 161 w 61 Apt 35g New York, NY 10019	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Educational Media - One Day U		Employer (See Instructions) Education
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sepulveda, Eugene <hr/> Contributor address; City; State; Zip Code 3114 WHEELER ST AUSTIN, TX 78705	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Entrepreneurs Foundation		Employer (See Instructions) Ceo

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/51 Rpt: 43/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shade, Randi <hr/> 6 Contributor address; City; State; Zip Code 1822 W. 10th St. Austin, TX 78703	7 Amount of Contribution (\$) \$36.00
8 Principal occupation / Job title (See Instructions) Na		9 Employer (See Instructions) Homemaker
Date 08/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shapiro, Lottie <hr/> Contributor address; City; State; Zip Code 3421 Monte Vista Dr - Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shapiro, Sandy <hr/> Contributor address; City; State; Zip Code 3421 Monte Vista Dr - Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharpe, Molly <hr/> Contributor address; City; State; Zip Code 1805 Exposition Blvd Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) Facilitator And Planning Consultant
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shekarchi, Mina <hr/> Contributor address; City; State; Zip Code 204 Attayac St. Austin, TX 78702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) City Of Austin		Employer (See Instructions) Government Worker

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/51 Rpt: 44/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/10/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shekarchi, Mina <hr/> 6 Contributor address; City; State; Zip Code 204 Attayac St. Austin, TX 78739	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) City Of Austin		9 Employer (See Instructions) Government Worker
Date 07/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shin, Eileen <hr/> Contributor address; City; State; Zip Code 220 Riverside Blvd Apt 3H New York, NY 10069	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Jpmorgan Chase & Co.		Employer (See Instructions) Attorney
Date 08/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirley, Abi <hr/> Contributor address; City; State; Zip Code 5504 CORDELL LN AUSTIN, TX 78723	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Holtzman Partners Treefolks Board Chair		Employer (See Instructions) Cpa
Date 08/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smiley, Andrew <hr/> Contributor address; City; State; Zip Code 3407 Thompson St. Austin, TX 78702	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Treefolks		Employer (See Instructions) Ceo
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, David C <hr/> Contributor address; City; State; Zip Code 3423 Mt. Barker Drive Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) United Way For Greater Austin		Employer (See Instructions) Ceo

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/51 Rpt: 45/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 08/17/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeff <hr/> 6 Contributor address; City; State; Zip Code 4005 Wrightwood Rd AUSTIN, TX 78722	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Opinion Analysts, Inc.		9 Employer (See Instructions) Consultant
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sonnenberg, Dale <hr/> Contributor address; City; State; Zip Code 501 West Ave #1107 Austin, TX 78701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Social Worker
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprinkle, Jason <hr/> Contributor address; City; State; Zip Code 7008 Boyle Drive Austin, TX 78724	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Ut Austin		Employer (See Instructions) Fundraiser
Date 08/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Graham <hr/> Contributor address; City; State; Zip Code 10402 Yucca Dr. Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Ut		Employer (See Instructions) Engineer
Date 07/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoker, James <hr/> Contributor address; City; State; Zip Code 1611 W. 5TH STREET #440 AUSTIN, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Morgan Stanley		Employer (See Instructions) Investment Professional

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/51 Rpt: 46/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 08/31/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sulak, Gail <hr/> 6 Contributor address; City; State; Zip Code 3605 Windsor Road Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sulak, Gail <hr/> Contributor address; City; State; Zip Code 3605 Windsor Road Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired Social Worker		Employer (See Instructions) Retired
Date 09/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Takata, Alison <hr/> Contributor address; City; State; Zip Code 4403 Bellvue Ave Austin, TX 78756	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tawil, Carmen <hr/> Contributor address; City; State; Zip Code 4806 Balcones Austin, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Corridor Television, Llp		Employer (See Instructions) Managing Partner
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Theiss, John <hr/> Contributor address; City; State; Zip Code 3304 Bryker Dr - Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/51 Rpt: 47/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Theiss, Susan <hr/> 6 Contributor address; City; State; Zip Code 3305 Bryker Dr Austin, TX 78703	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Lindsay <hr/> Contributor address; City; State; Zip Code 1500 Crossing Pl Apt 115 Austin, TX 78741	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Remedy Urgent Care		Employer (See Instructions) Physician Assistant
Date 09/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tulis, Jeffrey <hr/> Contributor address; City; State; Zip Code 7105 Running Rope Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) University Of Texas At Austin		Employer (See Instructions) Professor
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tulis, Jeffrey <hr/> Contributor address; City; State; Zip Code 7105 Running Rope Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) University Of Texas At Austin		Employer (See Instructions) Professor
Date 09/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tull/Rand, Leslie/Tommy <hr/> Contributor address; City; State; Zip Code 5803 Lookout Mtn Dr Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/51 Rpt: 48/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 08/27/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Gordon <hr/> 6 Contributor address; City; State; Zip Code 6518 Ladera Norte Austin, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valadez, James <hr/> Contributor address; City; State; Zip Code 54 Waller Austin, TX 78702	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Real Estate
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Overen, Peter <hr/> Contributor address; City; State; Zip Code 4008 Rosedale Ave. Austin, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Engineer
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaught, Tracy <hr/> Contributor address; City; State; Zip Code 5929 Balcones Dr STE 201 Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Vaught Law Firm, P.C.		Employer (See Instructions) Cpa
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voss, Michelle <hr/> Contributor address; City; State; Zip Code 5604 Bonnell Vista Street #6 Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) The Contemporary		Employer (See Instructions) Nonprofit Development

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/51 Rpt: 49/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 07/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vote Pac 6 Contributor address; City; State; Zip Code 3571 Far West Blvd PMB 149 - Austin, TX 78731	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waley, Roy Contributor address; City; State; Zip Code 5608 WOODROW AVE APT 15 AUSTIN, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Realtor
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walton, Cory Contributor address; City; State; Zip Code 1701 Bouldin Avenue Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Coryography		Employer (See Instructions) Communications
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ware, Bruce Contributor address; City; State; Zip Code 3605 Patience Boulevard Dallas, TX 75236	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Davita Inc		Employer (See Instructions) Executive
Date 09/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ware, Rhondalynne Contributor address; City; State; Zip Code 3605 Patience Blvd Dallas, TX 75236	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Ut Southwestern Medical Center		Employer (See Instructions) Accounting & Fiscal Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/51 Rpt: 50/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 08/27/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner, Phyllis <hr/> 6 Contributor address; City; State; Zip Code 5701 Trailridge Drive Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Tamara <hr/> Contributor address; City; State; Zip Code 2721 200th Ave East Lake Tapps, WA 98391	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Bill & Melinda Gates Foundation		Employer (See Instructions) Attorney
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webberman, Avi <hr/> Contributor address; City; State; Zip Code 7809 Harvestman Cove Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Ps		Employer (See Instructions) Data Engineer
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webberman, Gerald <hr/> Contributor address; City; State; Zip Code 7809 Harvestman Cove Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Jackson Walker		Employer (See Instructions) Attorney
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Dianne <hr/> Contributor address; City; State; Zip Code 8404 Ardash Lane Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/51 Rpt: 51/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/24/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggins, Lynne <hr/> 6 Contributor address; City; State; Zip Code 3310 Bridle Path Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) lws		9 Employer (See Instructions) Financial Advisor
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Kathleen <hr/> Contributor address; City; State; Zip Code 5922 Mountain Villa Drive Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson And Kuykendall, Mark And Dana <hr/> Contributor address; City; State; Zip Code 4311 Sinclair Ave Austin, TX 78756	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson And Kuykendall, Mark And Dana <hr/> Contributor address; City; State; Zip Code 4311 Sinclair Ave Austin, TX 78756	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson And Kuykendall, Mark And Dana <hr/> Contributor address; City; State; Zip Code 4311 Sinclair Ave Austin, TX 78756	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/51 Rpt: 52/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wollerson, Brandon <hr/> 6 Contributor address; City; State; Zip Code 7006 Juneberry Cove Austin, TX 78750	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Texas Health Action		9 Employer (See Instructions) Director Of Clinical Operations
Date 07/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Bill <hr/> Contributor address; City; State; Zip Code 3211 Funston St. Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, William <hr/> Contributor address; City; State; Zip Code 3211 Funston St. Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Edu Adm
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Sandra <hr/> Contributor address; City; State; Zip Code 8200 Neely Dr apt 119 Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Teacher
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Sanford <hr/> Contributor address; City; State; Zip Code 2102 West 11th Unit B Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/51 Rpt: 53/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/22/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Sanford <hr/> 6 Contributor address; City; State; Zip Code 2102 West 11th Unit B Austin, TX 78703	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Emeritus
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Laura <hr/> Contributor address; City; State; Zip Code 501 W 33rd St Austin, TX 78705	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Public Ed Advocacy Consulting
Date 07/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Youman Md, J Dudley <hr/> Contributor address; City; State; Zip Code 4007 Edgemont Dr Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Retired
Date 08/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Youman Md, J Dudley <hr/> Contributor address; City; State; Zip Code 4007 Edgemont Dr Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Retired
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Youman Md, J Dudley <hr/> Contributor address; City; State; Zip Code 4007 Edgemont Dr Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/51 Rpt: 54/59
2 FILER NAME Alter, Alison		3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/15/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yznaga, Mark <hr/> 6 Contributor address; City; State; Zip Code 2401 Briargrove Austin, TX 78704	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Consultant
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zappone, Donald <hr/> Contributor address; City; State; Zip Code 1514 W. 32nd Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Samaritan Center		Employer (See Instructions) Psychotherapist

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

Sch: 1/1 Rpt: 55/59

2 FILER NAME

Alter, Alison

3 Filer ID (Ethics Commission Filers)

00090003

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
Sch: 1/1 Rpt: 56/59

2 FILER NAME
Alter, Alison

3 Filer ID (Ethics Commission Filers)
00090003

4 TOTAL OF UNITEMIZED LOANS

\$ 0.00

5 Date of loan

7 Name of lender

☐ out-of-state PAC (ID#: _____)

9 Loan Amount (\$)

6 Is lender a
financial
institution?

8 Lender address; City; State; Zip Code

10 Interest Rate

11 Maturity Date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

☐ None

15 Check if personal funds were deposited into political account
(See Instructions)

☐

16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

☐ not applicable

18 Guarantor address; City; State; Zip Code

20 Principal occupation

21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/3 Rpt: 57/59	2 FILER NAME Alter, Alison	3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/21/2020	5 Payee name Chad Adams Photography	
6 Amount (\$) \$400.00	7 Payee address; City; State; Zip Code 1414 Tuffit Ln Austin, TX 78753	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/06/2020	Payee name CheckMark Typesetting	
Amount (\$) \$2,380.49	Payee address; City; State; Zip Code 3217 N IH 35 Austin, TX 78722	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2020	Payee name CheckMark Typesetting	
Amount (\$) \$1,057.27	Payee address; City; State; Zip Code 3217 N IH 35 Austin, TX 78722	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/3 Rpt: 58/59	2 FILER NAME Alter, Alison	3 Filer ID (Ethics Commission Filers) 00090003
4 Date 08/17/2020	5 Payee name City of Austin	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 301 W 2nd St Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Filing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/24/2020	Payee name Donateway	
Amount (\$) \$1,498.19	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2020	Payee name Liberal Austin Democrats	
Amount (\$) \$125.00	Payee address; City; State; Zip Code P.O. Box 49712 Austin, TX 78765	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship and Membership Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/3 Rpt: 59/59	2 FILER NAME Alter, Alison	3 Filer ID (Ethics Commission Filers) 00090003
4 Date 09/22/2020	5 Payee name NXNW Democrats	
6 Amount (\$) \$10.00	7 Payee address; City; State; Zip Code P.O. Box 29446 Austin, TX 78755	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/06/2020	Payee name Travis County Democratic Party	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1311 E. 6th St #B Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Big Tent Party
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held