



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

☐ Office Use Only

AUSTIN CITY CLERK
RECEIVED

2016 OCT 19 AM 9 29

1 INDIVIDUAL OR ORGANIZATION NAME <input type="checkbox"/> Filer is an individual	Committee or Organization Name* <div>Travis County Democratic Party</div>
2 INDIVIDUAL OR ORGANIZATION ADDRESS	Address/ PO Box* <div>PO Box 684263</div> Apartment or Suite Number <div></div> City* <div>Austin</div> State* <div>TX</div> Zip Code* <div>78768</div>
3 COMMITTEE TREASURER NAME (if applicable)	Title <div>Hon</div> First Name <div>Vincent</div> Middle Initial <div></div> Last Name <div>Harding</div> Suffix <div></div>
4 COMMITTEE TREASURER ADDRESS (if applicable)	Address/ PO Box <div></div> Apartment or Suite Number <div></div> City <div></div> State <div></div> Zip Code <div></div>
5 REPORT DATE	Date Filed (yyyymmdd)* <div>20161018</div>

* Indicates a required field



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

6 AFFIDAVIT

I swear or affirm upon penalty of perjury that each direct campaign expenditure was made without prior consent, cooperation, strategic communication, consultation, or sharing of material information regarding the communication's content, intended audience, timing, or method of dissemination between an affected candidate, the candidate's campaign staff, the candidate's campaign committee, or an agent or employee of the candidate or the committee, and the person making the expenditure, or that person's agent or employee.

I further swear that this Report of Direct Campaign Expenditures filed herewith is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code, Section 2-2-32.

DATE: 10/19/2016

Cynthia Hall Flint

AFFIANT'S SIGNATURE

Cynthia Hall Flint

PRINT NAME

STATE OF TEXAS

COUNTY OF TRAVIS

This instrument was acknowledged, sworn to and subscribed before me by

CYNTHIA HALL FLINT

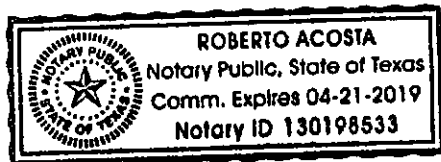
On the 19TH day of OCTOBER, 2016, to certify which witness my hand and official seal.

ROBERTO ACOSTA

Notary Public in and for the State of Texas

ROBERTO ACOSTA

Typed or Printed Name of Notary



Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME	<table border="1"> <tr> <td>Payee Title</td> <td colspan="2">Payee First Name*</td> </tr> <tr> <td></td> <td colspan="2">Ardian</td> </tr> <tr> <td colspan="2">Organization Name or Payee Last Name, as applicable*</td> <td>Payee Suffix</td> </tr> <tr> <td colspan="2">Shaholli</td> <td></td> </tr> </table>	Payee Title	Payee First Name*			Ardian		Organization Name or Payee Last Name, as applicable*		Payee Suffix	Shaholli						
Payee Title	Payee First Name*																
	Ardian																
Organization Name or Payee Last Name, as applicable*		Payee Suffix															
Shaholli																	
2 PAYEE ADDRESS	<table border="1"> <tr> <td colspan="2">Payee Address/ PO Box*</td> <td colspan="2">Payee Apartment or Suite Number</td> </tr> <tr> <td colspan="2">801 W 24th</td> <td colspan="2"></td> </tr> <tr> <td>Payee City*</td> <td>Payee State*</td> <td colspan="2">Payee Zip Code*</td> </tr> <tr> <td>Austin</td> <td>TX</td> <td colspan="2">78705</td> </tr> </table>	Payee Address/ PO Box*		Payee Apartment or Suite Number		801 W 24th				Payee City*	Payee State*	Payee Zip Code*		Austin	TX	78705	
Payee Address/ PO Box*		Payee Apartment or Suite Number															
801 W 24th																	
Payee City*	Payee State*	Payee Zip Code*															
Austin	TX	78705															
3 EXPENDITURE DETAILS	<table border="1"> <tr> <td>Category*</td> <td>(\$) Expenditure Amount*</td> </tr> <tr> <td>Salaries/Wages/Contract labor</td> <td>\$186.20</td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date*</td> </tr> <tr> <td>Canvasser Pay</td> <td>20161015</td> </tr> </table>	Category*	(\$) Expenditure Amount*	Salaries/Wages/Contract labor	\$186.20	Description (If Category is "Other")	Expenditure Date*	Canvasser Pay	20161015								
Category*	(\$) Expenditure Amount*																
Salaries/Wages/Contract labor	\$186.20																
Description (If Category is "Other")	Expenditure Date*																
Canvasser Pay	20161015																

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title <div></div> Payee First Name* <div>Jeslyn</div> Organization Name or Payee Last Name, as applicable* <div>Schuh</div> Payee Suffix <div></div>
2 PAYEE ADDRESS	Payee Address/ PO Box* <div>3014 W William Cannon</div> Payee Apartment or Suite Number <div></div> Payee City* <div>Austin</div> Payee State* <div>TX</div> Payee Zip Code* <div>78745</div>
3 EXPENDITURE DETAILS	Category* <div>Salaries/Wages/Contract labor</div> (\$) Expenditure Amount* <div>\$329.96</div> Description (If Category is "Other") <div>Canvasser Pay</div> Expenditure Date* <div>20161015</div>

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]

Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title <div></div> Payee First Name* <div>Brittany</div> Organization Name or Payee Last Name, as applicable* <div>Bell</div> Payee Suffix <div></div>
2 PAYEE ADDRESS	Payee Address/ PO Box* <div>7601 Daffan Ln</div> Payee Apartment or Suite Number <div></div> Payee City* <div>Austin</div> Payee State* <div>TX</div> Payee Zip Code* <div>78724</div>
3 EXPENDITURE DETAILS	Category* <div>Salaries/Wages/Contract labor</div> (\$) Expenditure Amount* <div>\$337.24</div> Description (If Category is "Other") <div>Canvasser Pay</div> Expenditure Date* <div>20161015</div>

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]

Itemize each direct campaign expenditure in Sections 1-4.

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

1. <div style="text-align: center;"> PAYEE NAME </div> <div> <input checked="" type="checkbox"/> Payee is an individual </div>	<div> <div>Payee Title</div> <div></div> </div> <div> <div>Payee First Name*</div> <div>Breanna</div> </div> <div> <div>Organization Name or Payee Last Name, as applicable*</div> <div>Bell</div> </div> <div> <div>Payee Suffix</div> <div></div> </div>	
2. <div style="text-align: center;"> PAYEE ADDRESS </div>	<div> <div>Payee Address/ PO Box*</div> <div>7601 Daffan Ln</div> </div> <div> <div>Payee City*</div> <div>Austin</div> </div>	<div> <div>Payee Apartment or Suite Number</div> <div></div> </div> <div> <div>Payee State*</div> <div>TX</div> </div> <div> <div>Payee Zip Code*</div> <div>78724</div> </div>
3. <div style="text-align: center;"> EXPENDITURE DETAILS </div>	<div> <div>Category*</div> <div>Salaries/Wages/Contract labor</div> </div> <div> <div>Description (If Category is "Other")</div> <div>Canvasser</div> </div>	<div> <div>(\$) Expenditure Amount*</div> <div>\$242.63</div> </div> <div> <div>Expenditure Date*</div> <div>20161015</div> </div>

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME	<table border="1"> <tr> <td>Payee Title</td> <td colspan="2">Payee First Name *</td> </tr> <tr> <td></td> <td colspan="2">Josette</td> </tr> <tr> <td colspan="2">Organization Name or Payee Last Name, as applicable *</td> <td>Payee Suffix</td> </tr> <tr> <td colspan="2">Brisena</td> <td></td> </tr> </table> <input checked="" type="checkbox"/> Payee is an individual	Payee Title	Payee First Name *			Josette		Organization Name or Payee Last Name, as applicable *		Payee Suffix	Brisena						
Payee Title	Payee First Name *																
	Josette																
Organization Name or Payee Last Name, as applicable *		Payee Suffix															
Brisena																	
2 PAYEE ADDRESS	<table border="1"> <tr> <td colspan="2">Payee Address/ PO Box *</td> <td colspan="2">Payee Apartment or Suite Number</td> </tr> <tr> <td colspan="2">5319 Jeff Davis</td> <td colspan="2"></td> </tr> <tr> <td>Payee City *</td> <td>Payee State *</td> <td colspan="2">Payee Zip Code *</td> </tr> <tr> <td>Austin</td> <td>TX</td> <td colspan="2">78756</td> </tr> </table>	Payee Address/ PO Box *		Payee Apartment or Suite Number		5319 Jeff Davis				Payee City *	Payee State *	Payee Zip Code *		Austin	TX	78756	
Payee Address/ PO Box *		Payee Apartment or Suite Number															
5319 Jeff Davis																	
Payee City *	Payee State *	Payee Zip Code *															
Austin	TX	78756															
3 EXPENDITURE DETAILS	<table border="1"> <tr> <td>Category *</td> <td>(\$) Expenditure Amount *</td> </tr> <tr> <td>Salaries/Wages/Contract labor</td> <td>\$99.16</td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date *</td> </tr> <tr> <td>Canvasser</td> <td>20161017</td> </tr> </table>	Category *	(\$) Expenditure Amount *	Salaries/Wages/Contract labor	\$99.16	Description (If Category is "Other")	Expenditure Date *	Canvasser	20161017								
Category *	(\$) Expenditure Amount *																
Salaries/Wages/Contract labor	\$99.16																
Description (If Category is "Other")	Expenditure Date *																
Canvasser	20161017																

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]

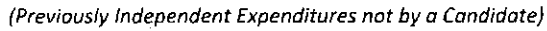
Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	<table border="1"> <tr> <td>Payee Title</td> <td colspan="2">Payee First Name*</td> </tr> <tr> <td></td> <td colspan="2">John</td> </tr> <tr> <td colspan="2">Organization Name or Payee Last Name, as applicable*</td> <td>Payee Suffix</td> </tr> <tr> <td colspan="2">Gallegos</td> <td></td> </tr> </table>	Payee Title	Payee First Name*			John		Organization Name or Payee Last Name, as applicable*		Payee Suffix	Gallegos		
Payee Title	Payee First Name*												
	John												
Organization Name or Payee Last Name, as applicable*		Payee Suffix											
Gallegos													
2 PAYEE ADDRESS	<table border="1"> <tr> <td>Payee Address/ PO Box*</td> <td colspan="2">Payee Apartment or Suite Number</td> </tr> <tr> <td>1511 Metric Blvd</td> <td colspan="2"></td> </tr> <tr> <td>Payee City*</td> <td>Payee State*</td> <td>Payee Zip Code*</td> </tr> <tr> <td>Austin</td> <td>TX</td> <td>78758</td> </tr> </table>	Payee Address/ PO Box*	Payee Apartment or Suite Number		1511 Metric Blvd			Payee City*	Payee State*	Payee Zip Code*	Austin	TX	78758
Payee Address/ PO Box*	Payee Apartment or Suite Number												
1511 Metric Blvd													
Payee City*	Payee State*	Payee Zip Code*											
Austin	TX	78758											
3 EXPENDITURE DETAILS	<table border="1"> <tr> <td>Category*</td> <td>(\$) Expenditure Amount*</td> </tr> <tr> <td>Salaries/Wages/Contract labor</td> <td>\$174.08</td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date*</td> </tr> <tr> <td>Canvasser Pay</td> <td>20161017</td> </tr> </table>	Category*	(\$) Expenditure Amount*	Salaries/Wages/Contract labor	\$174.08	Description (If Category is "Other")	Expenditure Date*	Canvasser Pay	20161017				
Category*	(\$) Expenditure Amount*												
Salaries/Wages/Contract labor	\$174.08												
Description (If Category is "Other")	Expenditure Date*												
Canvasser Pay	20161017												

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]





Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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

1	PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title Payee First Name* Michael Organization Name or Payee Last Name, as applicable* Giwah Payee Suffix
2	PAYEE ADDRESS	Payee Address/ PO Box* 6724 Quinton Payee City* Austin Payee Apartment or Suite Number Payee State* TX Payee Zip Code* 78705
3	EXPENDITURE DETAILS	Category* Salaries/Wages/Contract labor (\$) Expenditure Amount* \$54.50 Description (If Category is "Other") Canvasser Pay Expenditure Date* 20161017

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Prop 1 Support			

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME	<table border="0"> <tr> <td>Payee Title</td> <td colspan="2">Payee First Name*</td> </tr> <tr> <td><input type="text"/></td> <td colspan="2"><input type="text" value="Kathleen"/></td> </tr> <tr> <td colspan="2">Organization Name or Payee Last Name, as applicable*</td> <td>Payee Suffix</td> </tr> <tr> <td colspan="2"><input type="text" value="Redlin"/></td> <td><input type="text"/></td> </tr> </table> <input checked="" type="checkbox"/> Payee is an individual	Payee Title	Payee First Name*		<input type="text"/>	<input type="text" value="Kathleen"/>		Organization Name or Payee Last Name, as applicable*		Payee Suffix	<input type="text" value="Redlin"/>		<input type="text"/>
Payee Title	Payee First Name*												
<input type="text"/>	<input type="text" value="Kathleen"/>												
Organization Name or Payee Last Name, as applicable*		Payee Suffix											
<input type="text" value="Redlin"/>		<input type="text"/>											
2 PAYEE ADDRESS	<table border="0"> <tr> <td>Payee Address/ PO Box*</td> <td colspan="2">Payee Apartment or Suite Number</td> </tr> <tr> <td><input type="text" value="1704 Nelms"/></td> <td colspan="2"><input type="text"/></td> </tr> <tr> <td>Payee City*</td> <td>Payee State*</td> <td>Payee Zip Code*</td> </tr> <tr> <td><input type="text" value="Austin"/></td> <td><input type="text" value="TX"/></td> <td><input type="text" value="78747"/></td> </tr> </table>	Payee Address/ PO Box*	Payee Apartment or Suite Number		<input type="text" value="1704 Nelms"/>	<input type="text"/>		Payee City*	Payee State*	Payee Zip Code*	<input type="text" value="Austin"/>	<input type="text" value="TX"/>	<input type="text" value="78747"/>
Payee Address/ PO Box*	Payee Apartment or Suite Number												
<input type="text" value="1704 Nelms"/>	<input type="text"/>												
Payee City*	Payee State*	Payee Zip Code*											
<input type="text" value="Austin"/>	<input type="text" value="TX"/>	<input type="text" value="78747"/>											
3 EXPENDITURE DETAILS	<table border="0"> <tr> <td>Category*</td> <td>(\$) Expenditure Amount*</td> </tr> <tr> <td><input type="text" value="Salaries/Wages/Contract labor"/></td> <td><input type="text" value="\$160.99"/></td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date*</td> </tr> <tr> <td><input type="text" value="Canvasser Pay"/></td> <td><input type="text" value="20161017"/></td> </tr> </table>	Category*	(\$) Expenditure Amount*	<input type="text" value="Salaries/Wages/Contract labor"/>	<input type="text" value="\$160.99"/>	Description (If Category is "Other")	Expenditure Date*	<input type="text" value="Canvasser Pay"/>	<input type="text" value="20161017"/>				
Category*	(\$) Expenditure Amount*												
<input type="text" value="Salaries/Wages/Contract labor"/>	<input type="text" value="\$160.99"/>												
Description (If Category is "Other")	Expenditure Date*												
<input type="text" value="Canvasser Pay"/>	<input type="text" value="20161017"/>												

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	<table border="1"> <tr> <td>Payee Title</td> <td colspan="2">Payee First Name*</td> </tr> <tr> <td></td> <td colspan="2">William</td> </tr> <tr> <td colspan="2">Organization Name or Payee Last Name, as applicable*</td> <td>Payee Suffix</td> </tr> <tr> <td colspan="2">Davies</td> <td></td> </tr> </table>	Payee Title	Payee First Name*			William		Organization Name or Payee Last Name, as applicable*		Payee Suffix	Davies						
Payee Title	Payee First Name*																
	William																
Organization Name or Payee Last Name, as applicable*		Payee Suffix															
Davies																	
2 PAYEE ADDRESS	<table border="1"> <tr> <td colspan="2">Payee Address/ PO Box*</td> <td colspan="2">Payee Apartment or Suite Number</td> </tr> <tr> <td colspan="2">2211 Lawnmont</td> <td colspan="2"></td> </tr> <tr> <td>Payee City*</td> <td>Payee State*</td> <td colspan="2">Payee Zip Code*</td> </tr> <tr> <td>Austin</td> <td>TX</td> <td colspan="2">78744</td> </tr> </table>	Payee Address/ PO Box*		Payee Apartment or Suite Number		2211 Lawnmont				Payee City*	Payee State*	Payee Zip Code*		Austin	TX	78744	
Payee Address/ PO Box*		Payee Apartment or Suite Number															
2211 Lawnmont																	
Payee City*	Payee State*	Payee Zip Code*															
Austin	TX	78744															
3 EXPENDITURE DETAILS	<table border="1"> <tr> <td>Category*</td> <td>(\$) Expenditure Amount*</td> </tr> <tr> <td></td> <td>\$127.86</td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date*</td> </tr> <tr> <td></td> <td>20161015</td> </tr> </table>	Category*	(\$) Expenditure Amount*		\$127.86	Description (If Category is "Other")	Expenditure Date*		20161015								
Category*	(\$) Expenditure Amount*																
	\$127.86																
Description (If Category is "Other")	Expenditure Date*																
	20161015																

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]

Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME	<table border="1"> <tr> <td>Payee Title</td> <td colspan="3">Payee First Name*</td> </tr> <tr> <td></td> <td colspan="3">Joshua</td> </tr> <tr> <td colspan="2">Organization Name or Payee Last Name, as applicable*</td> <td colspan="2">Payee Suffix</td> </tr> <tr> <td colspan="2">Carmona</td> <td colspan="2"></td> </tr> </table> <input checked="" type="checkbox"/> Payee is an individual	Payee Title	Payee First Name*				Joshua			Organization Name or Payee Last Name, as applicable*		Payee Suffix		Carmona			
Payee Title	Payee First Name*																
	Joshua																
Organization Name or Payee Last Name, as applicable*		Payee Suffix															
Carmona																	
2 PAYEE ADDRESS	<table border="1"> <tr> <td colspan="2">Payee Address/ PO Box*</td> <td colspan="2">Payee Apartment or Suite Number</td> </tr> <tr> <td colspan="2">1515 Wickersham</td> <td colspan="2"></td> </tr> <tr> <td>Payee City*</td> <td>Payee State*</td> <td colspan="2">Payee Zip Code*</td> </tr> <tr> <td>Austin</td> <td>TX</td> <td colspan="2">78701</td> </tr> </table>	Payee Address/ PO Box*		Payee Apartment or Suite Number		1515 Wickersham				Payee City*	Payee State*	Payee Zip Code*		Austin	TX	78701	
Payee Address/ PO Box*		Payee Apartment or Suite Number															
1515 Wickersham																	
Payee City*	Payee State*	Payee Zip Code*															
Austin	TX	78701															
3 EXPENDITURE DETAILS	<table border="1"> <tr> <td>Category*</td> <td>(\$) Expenditure Amount*</td> </tr> <tr> <td>Salaries/Wages/Contract labor</td> <td>\$357.26</td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date*</td> </tr> <tr> <td>Canvasser Pay</td> <td>20161015</td> </tr> </table>	Category*	(\$) Expenditure Amount*	Salaries/Wages/Contract labor	\$357.26	Description (If Category is "Other")	Expenditure Date*	Canvasser Pay	20161015								
Category*	(\$) Expenditure Amount*																
Salaries/Wages/Contract labor	\$357.26																
Description (If Category is "Other")	Expenditure Date*																
Canvasser Pay	20161015																

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	<table border="1"> <tr> <td>Payee Title</td> <td>Payee First Name*</td> </tr> <tr> <td></td> <td>Carlos</td> </tr> <tr> <td>Organization Name or Payee Last Name, as applicable *</td> <td>Payee Suffix</td> </tr> <tr> <td>Chavez</td> <td></td> </tr> </table>	Payee Title	Payee First Name*		Carlos	Organization Name or Payee Last Name, as applicable *	Payee Suffix	Chavez					
Payee Title	Payee First Name*												
	Carlos												
Organization Name or Payee Last Name, as applicable *	Payee Suffix												
Chavez													
2 PAYEE ADDRESS	<table border="1"> <tr> <td>Payee Address/ PO Box*</td> <td colspan="2">Payee Apartment or Suite Number</td> </tr> <tr> <td>201 E 21 st</td> <td colspan="2"></td> </tr> <tr> <td>Payee City*</td> <td>Payee State*</td> <td>Payee Zip Code*</td> </tr> <tr> <td>Austin</td> <td>TX</td> <td>78701</td> </tr> </table>	Payee Address/ PO Box*	Payee Apartment or Suite Number		201 E 21 st			Payee City*	Payee State*	Payee Zip Code*	Austin	TX	78701
Payee Address/ PO Box*	Payee Apartment or Suite Number												
201 E 21 st													
Payee City*	Payee State*	Payee Zip Code*											
Austin	TX	78701											
3 EXPENDITURE DETAILS	<table border="1"> <tr> <td>Category*</td> <td>(\$) Expenditure Amount*</td> </tr> <tr> <td>Salaries/Wages/Contract labor</td> <td>\$447.40</td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date*</td> </tr> <tr> <td>Canvasser Pay</td> <td>20161015</td> </tr> </table>	Category*	(\$) Expenditure Amount*	Salaries/Wages/Contract labor	\$447.40	Description (If Category is "Other")	Expenditure Date*	Canvasser Pay	20161015				
Category*	(\$) Expenditure Amount*												
Salaries/Wages/Contract labor	\$447.40												
Description (If Category is "Other")	Expenditure Date*												
Canvasser Pay	20161015												

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]

Itemize each direct campaign expenditure in Sections 1-4.
For additional expenditures, click "Add Another Expenditure Page" below.

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	<table border="1"> <tr> <td>Payee Title</td> <td>Payee First Name*</td> </tr> <tr> <td></td> <td>Denzel</td> </tr> <tr> <td>Organization Name or Payee Last Name, as applicable*</td> <td>Payee Suffix</td> </tr> <tr> <td>Clifton</td> <td></td> </tr> </table>	Payee Title	Payee First Name*		Denzel	Organization Name or Payee Last Name, as applicable*	Payee Suffix	Clifton					
Payee Title	Payee First Name*												
	Denzel												
Organization Name or Payee Last Name, as applicable*	Payee Suffix												
Clifton													
2 PAYEE ADDRESS	<table border="1"> <tr> <td>Payee Address/ PO Box*</td> <td colspan="2">Payee Apartment or Suite Number</td> </tr> <tr> <td>603 Newhouse</td> <td colspan="2"></td> </tr> <tr> <td>Payee City*</td> <td>Payee State*</td> <td>Payee Zip Code*</td> </tr> <tr> <td>Austin</td> <td>TX</td> <td>78702</td> </tr> </table>	Payee Address/ PO Box*	Payee Apartment or Suite Number		603 Newhouse			Payee City*	Payee State*	Payee Zip Code*	Austin	TX	78702
Payee Address/ PO Box*	Payee Apartment or Suite Number												
603 Newhouse													
Payee City*	Payee State*	Payee Zip Code*											
Austin	TX	78702											
3 EXPENDITURE DETAILS	<table border="1"> <tr> <td>Category*</td> <td>(\$) Expenditure Amount*</td> </tr> <tr> <td>Salaries/Wages/Contract labor</td> <td>\$665.61</td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date*</td> </tr> <tr> <td>Canvasser Pay</td> <td>20161015</td> </tr> </table>	Category*	(\$) Expenditure Amount*	Salaries/Wages/Contract labor	\$665.61	Description (If Category is "Other")	Expenditure Date*	Canvasser Pay	20161015				
Category*	(\$) Expenditure Amount*												
Salaries/Wages/Contract labor	\$665.61												
Description (If Category is "Other")	Expenditure Date*												
Canvasser Pay	20161015												

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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

1	PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title 	Payee First Name* Alicia	Organization Name or Payee Last Name, as applicable* Shaffner	Payee Suffix
2	PAYEE ADDRESS	Payee Address/ PO Box* 202 E Walker		Payee Apartment or Suite Number 	
		Payee City* Austin		Payee State* TX	Payee Zip Code* 78756
3	EXPENDITURE DETAILS	Category* Salaries/Wages/Contract labor		(\$) Expenditure Amount* \$567.55	
		Description (If Category is "Other") Canvasser Pay		Expenditure Date* 20161015	

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable			
Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Proposition One Support			





Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title	Payee First Name *		
		Ryan		
	Organization Name or Payee Last Name, as applicable*		Payee Suffix	
	Simpson			
2 PAYEE ADDRESS	Payee Address/ PO Box *		Payee Apartment or Suite Number	
	4411 Spicewood Springs Rd			
	Payee City *		Payee State *	Payee Zip Code *
	Austin		TX	78756
3 EXPENDITURE DETAILS	Category *		(\$) Expenditure Amount *	
	Salaries/Wages/Contract labor		\$127.40	
	Description (If Category is "Other")		Expenditure Date *	
	Canvasser Pay		20161015	

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

Candidate Last Name or Ballot Measure Supported/Opposed *	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Prop 1 Support			



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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

1	PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title Payee First Name* Antonio Organization Name or Payee Last Name, as applicable* Mireles Payee Suffix
2	PAYEE ADDRESS	Payee Address/ PO Box* 3709 Arborlawn Payee City* Ft Worth Payee Apartment or Suite Number Payee State* TX Payee Zip Code* 76109
3	EXPENDITURE DETAILS	Category* Salaries/Wages/Contract labor (\$) Expenditure Amount* \$282.21 Description (If Category is "Other") Canvasser Pay Expenditure Date* 20161015

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Prop 1 Support			

Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	<table border="1"> <tr> <td>Payee Title</td> <td>Payee First Name*</td> </tr> <tr> <td></td> <td>Michael</td> </tr> <tr> <td>Organization Name or Payee Last Name, as applicable*</td> <td>Payee Suffix</td> </tr> <tr> <td>Passman</td> <td></td> </tr> </table>	Payee Title	Payee First Name*		Michael	Organization Name or Payee Last Name, as applicable*	Payee Suffix	Passman					
Payee Title	Payee First Name*												
	Michael												
Organization Name or Payee Last Name, as applicable*	Payee Suffix												
Passman													
2 PAYEE ADDRESS	<table border="1"> <tr> <td>Payee Address/ PO Box*</td> <td colspan="2">Payee Apartment or Suite Number</td> </tr> <tr> <td>1411 Cometa</td> <td colspan="2"></td> </tr> <tr> <td>Payee City*</td> <td>Payee State*</td> <td>Payee Zip Code*</td> </tr> <tr> <td>Austin</td> <td>TX</td> <td>78702</td> </tr> </table>	Payee Address/ PO Box*	Payee Apartment or Suite Number		1411 Cometa			Payee City*	Payee State*	Payee Zip Code*	Austin	TX	78702
Payee Address/ PO Box*	Payee Apartment or Suite Number												
1411 Cometa													
Payee City*	Payee State*	Payee Zip Code*											
Austin	TX	78702											
3 EXPENDITURE DETAILS	<table border="1"> <tr> <td>Category*</td> <td>(\$) Expenditure Amount*</td> </tr> <tr> <td>Salaries/Wages/Contract labor</td> <td>\$770.91</td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date*</td> </tr> <tr> <td>Canvasser</td> <td>20161015</td> </tr> </table>	Category*	(\$) Expenditure Amount*	Salaries/Wages/Contract labor	\$770.91	Description (If Category is "Other")	Expenditure Date*	Canvasser	20161015				
Category*	(\$) Expenditure Amount*												
Salaries/Wages/Contract labor	\$770.91												
Description (If Category is "Other")	Expenditure Date*												
Canvasser	20161015												

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.
For additional expenditures, click "Add Another Expenditure Page" below.

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title <div></div> Payee First Name* <div>Alexander</div> Organization Name or Payee Last Name, as applicable* <div>Wright</div> Payee Suffix <div></div>
2 PAYEE ADDRESS	Payee Address/ PO Box* <div>803 Tirado St</div> Payee Apartment or Suite Number <div></div> Payee City* <div>Austin</div> Payee State* <div>TX</div> Payee Zip Code* <div>78752</div>
3 EXPENDITURE DETAILS	Category* <div>Salaries/Wages/Contract labor</div> (\$) Expenditure Amount* <div>\$583.62</div> Description (If Category is "Other") <div>Canvasser Pay</div> Expenditure Date* <div>20161015</div>

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]

Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	<table border="1"> <tr> <td>Payee Title</td> <td>Payee First Name*</td> </tr> <tr> <td></td> <td>Sruti</td> </tr> <tr> <td colspan="2">Organization Name or Payee Last Name, as applicable*</td> </tr> <tr> <td>Gopalakrishnan</td> <td>Payee Suffix</td> </tr> <tr> <td></td> <td></td> </tr> </table>	Payee Title	Payee First Name*		Sruti	Organization Name or Payee Last Name, as applicable*		Gopalakrishnan	Payee Suffix				
Payee Title	Payee First Name*												
	Sruti												
Organization Name or Payee Last Name, as applicable*													
Gopalakrishnan	Payee Suffix												
2 PAYEE ADDRESS	<table border="1"> <tr> <td>Payee Address/ PO Box*</td> <td colspan="2">Payee Apartment or Suite Number</td> </tr> <tr> <td>2799 Nueces</td> <td colspan="2"></td> </tr> <tr> <td>Payee City*</td> <td>Payee State*</td> <td>Payee Zip Code*</td> </tr> <tr> <td>Austin</td> <td>TX</td> <td>78705</td> </tr> </table>	Payee Address/ PO Box*	Payee Apartment or Suite Number		2799 Nueces			Payee City*	Payee State*	Payee Zip Code*	Austin	TX	78705
Payee Address/ PO Box*	Payee Apartment or Suite Number												
2799 Nueces													
Payee City*	Payee State*	Payee Zip Code*											
Austin	TX	78705											
3 EXPENDITURE DETAILS	<table border="1"> <tr> <td>Category*</td> <td>(\$) Expenditure Amount*</td> </tr> <tr> <td>Salaries/Wages/Contract labor</td> <td>\$112.73</td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date*</td> </tr> <tr> <td>Canvasser Pay</td> <td>20161015</td> </tr> </table>	Category*	(\$) Expenditure Amount*	Salaries/Wages/Contract labor	\$112.73	Description (If Category is "Other")	Expenditure Date*	Canvasser Pay	20161015				
Category*	(\$) Expenditure Amount*												
Salaries/Wages/Contract labor	\$112.73												
Description (If Category is "Other")	Expenditure Date*												
Canvasser Pay	20161015												

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]

Itemize each direct campaign expenditure in Sections 1-4. For additional expenditures, click "Add Another Expenditure Page" below.

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	<table border="1"> <tr> <td>Payee Title</td> <td colspan="3">Payee First Name*</td> </tr> <tr> <td></td> <td colspan="3">Marco</td> </tr> <tr> <td colspan="2">Organization Name or Payee Last Name, as applicable *</td> <td colspan="2">Payee Suffix</td> </tr> <tr> <td colspan="2">Guajardo</td> <td colspan="2"></td> </tr> </table>	Payee Title	Payee First Name*				Marco			Organization Name or Payee Last Name, as applicable *		Payee Suffix		Guajardo			
Payee Title	Payee First Name*																
	Marco																
Organization Name or Payee Last Name, as applicable *		Payee Suffix															
Guajardo																	
2 PAYEE ADDRESS	<table border="1"> <tr> <td colspan="2">Payee Address/ PO Box*</td> <td colspan="2">Payee Apartment or Suite Number</td> </tr> <tr> <td colspan="2">408 W 17th</td> <td colspan="2"></td> </tr> <tr> <td>Payee City*</td> <td>Payee State*</td> <td colspan="2">Payee Zip Code*</td> </tr> <tr> <td>Austin</td> <td>TX</td> <td colspan="2">78701-1242</td> </tr> </table>	Payee Address/ PO Box*		Payee Apartment or Suite Number		408 W 17th				Payee City*	Payee State*	Payee Zip Code*		Austin	TX	78701-1242	
Payee Address/ PO Box*		Payee Apartment or Suite Number															
408 W 17th																	
Payee City*	Payee State*	Payee Zip Code*															
Austin	TX	78701-1242															
3 EXPENDITURE DETAILS	<table border="1"> <tr> <td>Category*</td> <td>(\$) Expenditure Amount*</td> </tr> <tr> <td>Salaries/Wages/Contract labor</td> <td>\$308.55</td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date*</td> </tr> <tr> <td>Canvasser Prop 1</td> <td>20161015</td> </tr> </table>	Category*	(\$) Expenditure Amount*	Salaries/Wages/Contract labor	\$308.55	Description (If Category is "Other")	Expenditure Date*	Canvasser Prop 1	20161015								
Category*	(\$) Expenditure Amount*																
Salaries/Wages/Contract labor	\$308.55																
Description (If Category is "Other")	Expenditure Date*																
Canvasser Prop 1	20161015																

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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

1	PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title Payee First Name* Andrew Organization Name or Payee Last Name, as applicable* Herrera Payee Suffix
2	PAYEE ADDRESS	Payee Address/ PO Box* 2500 University Ave. Payee City* Austin Payee Apartment or Suite Number Payee State* TX Payee Zip Code* 78705
3	EXPENDITURE DETAILS	Category* Salaries/Wages/Contract labor (\$) Expenditure Amount* \$68.43 Description (If Category is "Other") Canvasser Pay Expenditure Date* 20161015

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Support Prop 1			

Expenditure

Itemize each direct campaign expenditure in Sections 1-4:

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

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	<table border="1"> <tr> <td>Payee Title</td> <td colspan="3">Payee First Name*</td> </tr> <tr> <td></td> <td colspan="3">Kimberly</td> </tr> <tr> <td colspan="2">Organization Name or Payee Last Name, as applicable*</td> <td colspan="2">Payee Suffix</td> </tr> <tr> <td colspan="2">Hurst</td> <td colspan="2"></td> </tr> </table>	Payee Title	Payee First Name*				Kimberly			Organization Name or Payee Last Name, as applicable*		Payee Suffix		Hurst			
Payee Title	Payee First Name*																
	Kimberly																
Organization Name or Payee Last Name, as applicable*		Payee Suffix															
Hurst																	
2 PAYEE ADDRESS	<table border="1"> <tr> <td colspan="2">Payee Address/ PO Box*</td> <td colspan="2">Payee Apartment or Suite Number</td> </tr> <tr> <td colspan="2">8528 Parthenon</td> <td colspan="2"></td> </tr> <tr> <td>Payee City*</td> <td>Payee State*</td> <td colspan="2">Payee Zip Code*</td> </tr> <tr> <td>Universal City</td> <td>TX</td> <td colspan="2">78148</td> </tr> </table>	Payee Address/ PO Box*		Payee Apartment or Suite Number		8528 Parthenon				Payee City*	Payee State*	Payee Zip Code*		Universal City	TX	78148	
Payee Address/ PO Box*		Payee Apartment or Suite Number															
8528 Parthenon																	
Payee City*	Payee State*	Payee Zip Code*															
Universal City	TX	78148															
3 EXPENDITURE DETAILS	<table border="1"> <tr> <td>Category*</td> <td>(\$) Expenditure Amount*</td> </tr> <tr> <td>Salaries/Wages/Contract labor</td> <td>\$56.31</td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date*</td> </tr> <tr> <td>Canvasser Pay</td> <td>20161015</td> </tr> </table>	Category*	(\$) Expenditure Amount*	Salaries/Wages/Contract labor	\$56.31	Description (If Category is "Other")	Expenditure Date*	Canvasser Pay	20161015								
Category*	(\$) Expenditure Amount*																
Salaries/Wages/Contract labor	\$56.31																
Description (If Category is "Other")	Expenditure Date*																
Canvasser Pay	20161015																

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	<table border="1"> <tr> <td>Payee Title</td> <td>Payee First Name*</td> </tr> <tr> <td></td> <td>Jerry</td> </tr> <tr> <td>Organization Name or Payee Last Name, as applicable*</td> <td>Payee Suffix</td> </tr> <tr> <td>Loomis</td> <td></td> </tr> </table>	Payee Title	Payee First Name*		Jerry	Organization Name or Payee Last Name, as applicable*	Payee Suffix	Loomis					
Payee Title	Payee First Name*												
	Jerry												
Organization Name or Payee Last Name, as applicable*	Payee Suffix												
Loomis													
2 PAYEE ADDRESS	<table border="1"> <tr> <td>Payee Address/ PO Box*</td> <td colspan="2">Payee Apartment or Suite Number</td> </tr> <tr> <td>7201 Wood Hollow Dr.</td> <td colspan="2"></td> </tr> <tr> <td>Payee City*</td> <td>Payee State*</td> <td>Payee Zip Code*</td> </tr> <tr> <td>Austin</td> <td>TX</td> <td>78731</td> </tr> </table>	Payee Address/ PO Box*	Payee Apartment or Suite Number		7201 Wood Hollow Dr.			Payee City*	Payee State*	Payee Zip Code*	Austin	TX	78731
Payee Address/ PO Box*	Payee Apartment or Suite Number												
7201 Wood Hollow Dr.													
Payee City*	Payee State*	Payee Zip Code*											
Austin	TX	78731											
3 EXPENDITURE DETAILS	<table border="1"> <tr> <td>Category*</td> <td>(\$) Expenditure Amount*</td> </tr> <tr> <td>Salaries/Wages/Contract labor</td> <td>\$852.65</td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date*</td> </tr> <tr> <td>Canvasser Pay</td> <td>20161015</td> </tr> </table>	Category*	(\$) Expenditure Amount*	Salaries/Wages/Contract labor	\$852.65	Description (If Category is "Other")	Expenditure Date*	Canvasser Pay	20161015				
Category*	(\$) Expenditure Amount*												
Salaries/Wages/Contract labor	\$852.65												
Description (If Category is "Other")	Expenditure Date*												
Canvasser Pay	20161015												

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title <div></div> Payee First Name* <div>Patrick</div> Organization Name or Payee Last Name, as applicable* <div>Brogan</div> Payee Suffix <div></div>
2 PAYEE ADDRESS	Payee Address/ PO Box* <div>6407 Springdale Rd.</div> Payee Apartment or Suite Number <div></div> Payee City* <div>Austin</div> Payee State* <div>TX</div> Payee Zip Code* <div>78723</div>
3 EXPENDITURE DETAILS	Category* <div>Salaries/Wages/Contract labor</div> (\$) Expenditure Amount* <div>\$87.74</div> Description (If Category is "Other") <div>Canvasser</div> Expenditure Date* <div>20161015</div>

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* AFSCME PAC		
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* 1625 L St. NW	Contributor Apartment or Suite Number 	Contributor City* Washington
	Contributor State* DC	Contributor Zip Code* 20036	Contributor Employer*
	Contributor Occupation* 		
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20160928	(\$) Contribution Amount* \$2,000.00	



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* Judge Julie Kocurek Campaign Fund		
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* 2803 Scenic Dr.	Contributor Apartment or Suite Number	
	Contributor City* Austin	Contributor State* TX	Contributor Zip Code* 78703
	Contributor Employer* 	Contributor Occupation* 	
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20160928		(%) Contribution Amount* \$2,000.00



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* <div>Sarah Eckhardt</div>		
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* <div>PO Box 301586</div> Contributor City* <div>Austin</div> Contributor Employer* <div></div>	Contributor Apartment or Suite Number <div></div> Contributor State* <div>TX</div> Contributor Zip Code* <div>78703</div> Contributor Occupation* <div></div>	
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* <div>20160928</div> (\$) Contribution Amount* <div>\$4,250.00</div>		



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input checked="" type="checkbox"/> Contributor is an individual	Contributor Title Contributor First Name* Ricky	
	Organization Name or Contributor Last Name, as applicable* Gerald	Contributor Suffix
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/PO Box* 2513 McCallum Dr.	
	Contributor Apartment or Suite Number 	
	Contributor City* Austin	Contributor State* TX
	Contributor Zip Code* 78703	
	Contributor Employer* Self	Contributor Occupation* Self Employed
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20160930	
	(\$) Contribution Amount* \$2,700.00	



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* Jeff Travillion Campaign	
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* PO Box 2425 Contributor City* Austin Contributor Employer* 	Contributor Apartment or Suite Number Contributor State* TX Contributor Zip Code* 78768 Contributor Occupation*
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20161013	(\$) Contribution Amount* \$2,000.00



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* <div>Sally Hernandez Campaign</div>		
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* <div>PO Box 152032</div>	Contributor Apartment or Suite Number <div></div>	Contributor City* <div>Austin</div>
	Contributor State* <div>TX</div>	Contributor Zip Code* <div>78715</div>	Contributor Employer* <div></div>
	Contributor Occupation* <div></div>		
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* <div>20161013</div>	(\$) Contribution Amount* <div>\$5,000.00</div>	



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* <div>Lloyd Doggett for Congress</div>		
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* <div>PO Box 5843</div>	Contributor Apartment or Suite Number <div></div>	
	Contributor City* <div>Austin</div>	Contributor State* <div>TX</div>	Contributor Zip Code* <div>78763</div>
	Contributor Employer* <div></div>	Contributor Occupation* <div></div>	
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* <div>20161013</div>		(\$) Contribution Amount* <div>\$5,000.00</div>



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1. CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* Fort Bend County Democratic Party		
2. CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* 509 S. 5th St.	Contributor Apartment or Suite Number 	Contributor City* Richmond
	Contributor State* TX	Contributor Zip Code* 77469	Contributor Employer*
	Contributor Occupation* 		
3. CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20161007	(\$) Contribution Amount* \$600.00	



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* Austin Forward PAC		
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* 2408 Manor Rd	Contributor Apartment or Suite Number 	Contributor City* Austin
	Contributor State* TX	Contributor Zip Code* 78722	Contributor Employer*
	Contributor Occupation* 		
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20161007	(\$) Contribution Amount* \$5,000.00	



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* Kirk Watson Campaign				
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* PO Box 2004	Contributor Apartment or Suite Number 	Contributor City* Austin	Contributor State* TX	Contributor Zip Code* 78768
3 CONTRIBUTOR DETAILS	Contributor Employer* 		Contributor Occupation* 		
	Contribution Date (yyyymmdd)* 20161011		(\$) Contribution Amount* \$5,000.00		



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input checked="" type="checkbox"/> Contributor is an individual	<table><tr><td>Contributor Title</td><td>Contributor First Name*</td></tr><tr><td></td><td>Bruce and Deborah</td></tr><tr><td colspan="2">Organization Name or Contributor Last Name, as applicable*</td></tr><tr><td>Clark</td><td>Contributor Suffix</td></tr><tr><td></td><td></td></tr></table>	Contributor Title	Contributor First Name*		Bruce and Deborah	Organization Name or Contributor Last Name, as applicable*		Clark	Contributor Suffix																
Contributor Title	Contributor First Name*																								
	Bruce and Deborah																								
Organization Name or Contributor Last Name, as applicable*																									
Clark	Contributor Suffix																								
2 CONTRIBUTOR ADDRESS AND EMPLOYER	<table><tr><td colspan="2">Contributor Address/ PO Box*</td><td colspan="2">Contributor Apartment or Suite Number</td></tr><tr><td colspan="2">3624 N Hills Dr,</td><td colspan="2"></td></tr><tr><td>Contributor City*</td><td>Contributor State*</td><td colspan="2">Contributor Zip Code*</td></tr><tr><td>Austin</td><td>TX</td><td colspan="2">78731</td></tr><tr><td colspan="2">Contributor Employer*</td><td colspan="2">Contributor Occupation*</td></tr><tr><td colspan="2">Clark and Clark</td><td colspan="2">Attorney</td></tr></table>	Contributor Address/ PO Box*		Contributor Apartment or Suite Number		3624 N Hills Dr,				Contributor City*	Contributor State*	Contributor Zip Code*		Austin	TX	78731		Contributor Employer*		Contributor Occupation*		Clark and Clark		Attorney	
Contributor Address/ PO Box*		Contributor Apartment or Suite Number																							
3624 N Hills Dr,																									
Contributor City*	Contributor State*	Contributor Zip Code*																							
Austin	TX	78731																							
Contributor Employer*		Contributor Occupation*																							
Clark and Clark		Attorney																							
3 CONTRIBUTION DETAILS	<table><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td>20161012</td><td>\$500.00</td></tr></table>	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*	20161012	\$500.00																				
Contribution Date (yyyymmdd)*	(\$) Contribution Amount*																								
20161012	\$500.00																								



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* Celia Israel Campaign	
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* 3604 Carla Dr.	Contributor Apartment or Suite Number
	Contributor City* Austin	Contributor State* Contributor Zip Code* TX 78754
	Contributor Employer* 	Contributor Occupation*
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20161013	(\$) Contribution Amount* \$8,000.00



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* <div>Austin Forward PAC</div>		
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* <div>2408 Manor Rd</div>	Contributor Apartment or Suite Number <div></div>	Contributor City* <div>Austin</div>
	Contributor State* <div>TX</div>	Contributor Zip Code* <div>78722</div>	Contributor Employer* <div></div>
	Contributor Occupation* <div></div>		
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* <div>20161013</div>	(\$) Contribution Amount* <div>\$5,000.00</div>	



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input checked="" type="checkbox"/> Contributor is an individual	<table><tr><td>Contributor Title</td><td>Contributor First Name*</td></tr><tr><td></td><td>Jenna</td></tr><tr><td colspan="2">Organization Name or Contributor Last Name, as applicable*</td></tr><tr><td colspan="2">Martin</td></tr><tr><td colspan="2">Contributor Suffix</td></tr><tr><td colspan="2"></td></tr></table>	Contributor Title	Contributor First Name*		Jenna	Organization Name or Contributor Last Name, as applicable*		Martin		Contributor Suffix															
Contributor Title	Contributor First Name*																								
	Jenna																								
Organization Name or Contributor Last Name, as applicable*																									
Martin																									
Contributor Suffix																									
2 CONTRIBUTOR ADDRESS AND EMPLOYER	<table><tr><td colspan="2">Contributor Address/ PO Box*</td><td colspan="2">Contributor Apartment or Suite Number</td></tr><tr><td colspan="2">4313 Mattie St.</td><td colspan="2"></td></tr><tr><td>Contributor City*</td><td>Contributor State*</td><td colspan="2">Contributor Zip Code*</td></tr><tr><td>Austin</td><td>TX</td><td colspan="2">78723</td></tr><tr><td colspan="2">Contributor Employer*</td><td colspan="2">Contributor Occupation*</td></tr><tr><td colspan="2">AISD</td><td colspan="2">Teacher</td></tr></table>	Contributor Address/ PO Box*		Contributor Apartment or Suite Number		4313 Mattie St.				Contributor City*	Contributor State*	Contributor Zip Code*		Austin	TX	78723		Contributor Employer*		Contributor Occupation*		AISD		Teacher	
Contributor Address/ PO Box*		Contributor Apartment or Suite Number																							
4313 Mattie St.																									
Contributor City*	Contributor State*	Contributor Zip Code*																							
Austin	TX	78723																							
Contributor Employer*		Contributor Occupation*																							
AISD		Teacher																							
3 CONTRIBUTION DETAILS	<table><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td>20161013</td><td>\$500.00</td></tr></table>	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*	20161013	\$500.00																				
Contribution Date (yyyymmdd)*	(\$) Contribution Amount*																								
20161013	\$500.00																								



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input checked="" type="checkbox"/> Contributor is an individual	Contributor Title 		Contributor First Name* Edward	
	Organization Name or Contributor Last Name, as applicable* Fernandex		Contributor Suffix 	
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* 713 Beardsley Ln,		Contributor Apartment or Suite Number 	
	Contributor City* Austin		Contributor State* TX	Contributor Zip Code* 78746
	Contributor Employer* Houston & Williams LLP		Contributor Occupation* Attorney	
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20161014		(\$) Contribution Amount* \$500.00	



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* Stonewall Democrats of Austin	
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* PO Box 4712	Contributor Apartment or Suite Number
	Contributor City* Austin	Contributor State* TX
	Contributor Zip Code* 78765	
	Contributor Employer* 	Contributor Occupation*
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20161017	(\$) Contribution Amount* \$500.00



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* Midwest Region Laborer's Political League		
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* 1 N Old State Capitol Plaza	Contributor Apartment or Suite Number	
	Contributor City* Springfield	Contributor State* IL	Contributor Zip Code* 62701
	Contributor Employer* 	Contributor Occupation* 	
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20161017	(\$) Contribution Amount* \$5,000.00	

Add Another Contribution Page