



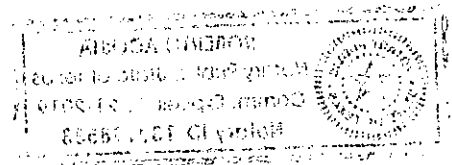
Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

☐ Office Use Only

1 INDIVIDUAL OR ORGANIZATION NAME <input type="checkbox"/> Filer is an individual	Committee or Organization Name* Austin Forward PAC (aka Move Austin Forward) <div>2016 NOV 4 PM 4 53 AUSTIN CITY CLERK RECEIVED</div>
2 INDIVIDUAL OR ORGANIZATION ADDRESS	Address/ PO Box* P.O. Box 302854 Apartment or Suite Number City* Austin State* TX Zip Code* 78703
3 COMMITTEE TREASURER NAME (if applicable)	Title Ms. First Name Laura Middle Initial Last Name Hernandez Suffix
4 COMMITTEE TREASURER ADDRESS (if applicable)	Address/ PO Box 710 Colorado Street Apartment or Suite Number #6C City Austin State TX Zip Code 78701
5 REPORT DATE	Date Filed (yyyymmdd)* 20161104

* Indicates a required field





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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: 11/4/16

AFFIANT'S SIGNATURE

Laura Hernandez

PRINT NAME

STATE OF TEXAS

COUNTY OF TRAVIS

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

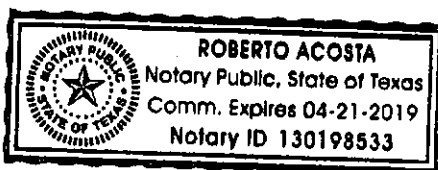
LAURA HERNANDEZ

On the 4th day of NOVEMBER, 2016, to certify which witness my hand and official seal.

Notary Public in and for the State of Texas

ROBERTO ACOSTA

Typed or Printed Name of Notary





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Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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

1	PAYEE NAME <input type="checkbox"/> Payee is an individual	Organization Name or Payee Last Name, as applicable* OfficeMax / Office Depot		
2	PAYEE ADDRESS	Payee Address/ PO Box* 2101 S Lamar Blvd	Payee Apartment or Suite Number	
		Payee City* Austin	Payee State* TX	Payee Zip Code* 78704-4921
3	EXPENDITURE DETAILS	Category* Office Overhead/Rental Expense	(\$) Expenditure Amount* \$160.19	
		Description (If Category is "Other")	Expenditure Date* 20161102	

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 City of Austin Prop 1			

Add Another Expenditure Page

Remove this page



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

[illegible]



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

[illegible]



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

[illegible]

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME <input type="checkbox"/> Payee is an individual	Organization Name or Payee Last Name, as applicable* <div>Texas Workforce Commission</div>		
2 PAYEE ADDRESS	Payee Address/ PO Box* <div>101 E 15th St</div> Payee City* <div>Austin</div>		Payee Apartment or Suite Number <div></div> Payee State* <div>TX</div> Payee Zip Code* <div>78778-1442</div>
3 EXPENDITURE DETAILS	Category* <div>Salaries/Wages/Contract labor</div> Description (If Category is "Other") <div></div>		(\$) Expenditure Amount* <div>\$767.25</div> Expenditure Date* <div>20161102</div>

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

[illegible]

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Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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

1 PAYEE NAME <input type="checkbox"/> Payee is an individual	Organization Name or Payee Last Name, as applicable* <div>Easter Seals Central Texas</div>		
2 PAYEE ADDRESS	Payee Address/ PO Box* <div>8505 Cross Park Dr</div> Payee City* <div>Austin</div>		Payee Apartment or Suite Number <div>Ste 120</div> Payee State* <div>TX</div> Payee Zip Code* <div>78754-4552</div>
3 EXPENDITURE DETAILS	Category* <div>Event Expense</div> Description (If Category is "Other") <div></div>		(\$) Expenditure Amount* <div>\$2,500.00</div> Expenditure Date* <div>20161103</div>

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

[illegible]

Add Another Expenditure Page

Remove this page

Revised 9/15/2016
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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* Richard Organization Name or Contributor Last Name, as applicable* Garriott de Cayeux Contributor Suffix
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* 7400 Coldwater Cyn Rd Contributor City* Austin Contributor Employer* Portalarium Contributor Apartment or Suite Number Contributor State* TX Contributor Zip Code* 78730 Contributor Occupation* CEO
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20161102 (\$) Contribution Amount* \$1,500.00

Add Another Contribution Page

Remove this page