



| | | | |
|---|--|----------------------------|--|
| 1 INDIVIDUAL OR ORGANIZATION NAME <input type="checkbox"/> Filer is an individual | Committee or Organization Name* Austin Citizens for Truthful Petitions OCC RECEIVED AT OCT 22 '18 PM1:08 | | |
| 2 INDIVIDUAL OR ORGANIZATION ADDRESS | Address/ PO Box* 1507 W. 6th St. City* Austin | | Apartment or Suite Number State* TX Zip Code* 78703 |
| 3 COMMITTEE TREASURER NAME (if applicable) | Title Mrs | First Name Janis | Middle Initial Last Name Pinnelli |
| 4 COMMITTEE TREASURER ADDRESS (if applicable) | Address/ PO Box 1507 W. 6th St. City Austin | | Apartment or Suite Number State TX Zip Code 78703 |
| 5 REPORT DATE | Date Filed (yyyymmdd)* 20181022 | | |

*** 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: 10/22/18

[Signature]
AFFIANT'S SIGNATURE

Julita Pardo
PRINT NAME

STATE OF TEXAS

COUNTY OF TRAVIS

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

Julita Pardo

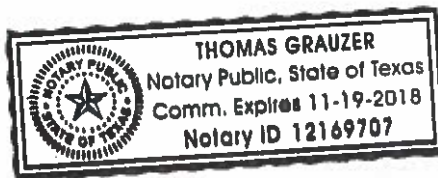
On the 22nd day of October, 2018, to certify which witness my hand and official seal.

Thomas Grauzer

Notary Public in and for the State of Texas

Thomas Grauzer

Typed or Printed Name of Notary



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>Austin Chronicle</div> | |
| 2 PAYEE ADDRESS | Payee Address/ PO Box* <div>P.O. Box 4189</div> Payee City* <div>Austin</div> | Payee Apartment or Suite Number <div></div> Payee State* <div>TX</div> Payee Zip Code* <div>78765</div> |
| 3 EXPENDITURE DETAILS | Category* <div>Advertising Expense</div> Description (If Category is "Other") <div></div> | (\$) Expenditure Amount* <div>\$1,545.00</div> Expenditure Date* <div>20181002</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.

[illegible]

Revised 8/4/2016
Page 5 of 35



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.

| | | |
|--|--|---|
| 1 PAYEE NAME <input type="checkbox"/> Payee is an individual | Organization Name or Payee Last Name, as applicable* <div>CheckMark Typesetting</div> | |
| 2 PAYEE ADDRESS | Payee Address/ PO Box* <div>3217 N Interstate 35 Frontage Rd.</div> Payee City* <div>Austin</div> | Payee Apartment or Suite Number <div></div> Payee State* <div>TX</div> Payee Zip Code* <div>78722</div> |
| 3 EXPENDITURE DETAILS | Category* <div>Printing Expense</div> Description (If Category is "Other") <div></div> | (\$) Expenditure Amount* <div>\$2,947.20</div> Expenditure Date* <div>20181016</div> |

[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 type="checkbox"/> Payee is an individual | Organization Name or Payee Last Name, as applicable* Austin Chronicle | | |
| 2 | PAYEE ADDRESS | Payee Address/ PO Box* P.O. Box 4189 | Payee Apartment or Suite Number | |
| | | Payee City* Austin | Payee State* TX | Payee Zip Code* 78765 |
| 3 | EXPENDITURE DETAILS | Category* Advertising Expense | (\$) Expenditure Amount* \$1,345.00 | |
| | | Description (If Category is "Other") | Expenditure Date* 20181016 | |

| 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) |
| Opposed Proposition K | | | |
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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>City Lights Group</div> | |
| 2 PAYEE ADDRESS | <div> <div>Payee Address/ PO Box*</div> <div>1604 Kerr Ave.</div> </div> <div> <div>Payee Apartment or Suite Number</div> <div></div> </div> <div> <div>Payee City*</div> <div>Austin</div> </div> <div> <div>Payee State*</div> <div>TX</div> </div> <div> <div>Payee Zip Code*</div> <div>78704</div> </div> | |
| 3 EXPENDITURE DETAILS | <div> <div>Category*</div> <div>Advertising Expense</div> </div> <div> <div>(\$) Expenditure Amount*</div> <div>\$10,000.00</div> </div> <div> <div>Description (If Category is "Other")</div> <div></div> </div> <div> <div>Expenditure Date*</div> <div>20181019</div> </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)

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* City Lights Group | | |
| 2 | PAYEE ADDRESS | Payee Address/ PO Box* 1604 Kerr Ave. | Payee Apartment or Suite Number | |
| | | Payee City* Austin | Payee State* TX | Payee Zip Code* 78704 |
| 3 | EXPENDITURE DETAILS | Category* Advertising Expense | (\$) Expenditure Amount* \$3,500.00 | |
| | | Description (If Category is "Other") | Expenditure Date* 20181019 | |

| 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) |
| Opposed Proposition K | | | |
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Add Another Expenditure Page



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>John</td></tr><tr><td colspan="2">Organization Name or Contributor Last Name, as applicable*</td></tr><tr><td colspan="2">Donisi</td></tr><tr><td colspan="2">Contributor Suffix</td></tr><tr><td colspan="2"></td></tr></table> | Contributor Title | Contributor First Name* | | John | Organization Name or Contributor Last Name, as applicable* | | Donisi | | Contributor Suffix | | | | | | | | | | | | | | | |
| Contributor Title | Contributor First Name* | | | | | | | | | | | | | | | | | | | | | | | | |
| | John | | | | | | | | | | | | | | | | | | | | | | | | |
| Organization Name or Contributor Last Name, as applicable* | | | | | | | | | | | | | | | | | | | | | | | | | |
| Donisi | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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">2220 Parkway</td><td colspan="2"></td></tr><tr><td colspan="2">Contributor City*</td><td>Contributor State*</td><td>Contributor Zip Code*</td></tr><tr><td colspan="2">Austin</td><td>TX</td><td>78703</td></tr><tr><td colspan="2">Contributor Employer*</td><td colspan="2">Contributor Occupation*</td></tr><tr><td colspan="2">Self</td><td colspan="2">Attorney</td></tr></table> | Contributor Address/ PO Box* | | Contributor Apartment or Suite Number | | 2220 Parkway | | | | Contributor City* | | Contributor State* | Contributor Zip Code* | Austin | | TX | 78703 | Contributor Employer* | | Contributor Occupation* | | Self | | Attorney | |
| Contributor Address/ PO Box* | | Contributor Apartment or Suite Number | | | | | | | | | | | | | | | | | | | | | | | |
| 2220 Parkway | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contributor City* | | Contributor State* | Contributor Zip Code* | | | | | | | | | | | | | | | | | | | | | | |
| Austin | | TX | 78703 | | | | | | | | | | | | | | | | | | | | | | |
| Contributor Employer* | | Contributor Occupation* | | | | | | | | | | | | | | | | | | | | | | | |
| Self | | Attorney | | | | | | | | | | | | | | | | | | | | | | | |
| 3 CONTRIBUTION DETAILS | <table><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td>20180928</td><td>\$500.00</td></tr></table> | Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | 20180928 | \$500.00 | | | | | | | | | | | | | | | | | | | | |
| Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | | | | | | | | | | | | | | | | | | | | | | | | |
| 20180928 | \$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* Austinites for Equity | | |
| 2 CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* 1812 Centre Creek Dr. | Contributor Apartment or Suite Number #310 | |
| | Contributor City* Austin | Contributor State* TX | Contributor Zip Code* 78754 |
| | Contributor Employer* | Contributor Occupation* | |
| 3 CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* 20181003 | (\$) 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.

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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* Laurie |
| | | Organization Name or Contributor Last Name, as applicable* Swan | Contributor Suffix |
| 2 | CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* 1611 Northwood Rd. | Contributor Apartment or Suite Number |
| | | Contributor City* Austin | Contributor State* TX |
| | | Contributor Zip Code* 78703 | |
| | | Contributor Employer* Stratus Properties LLC | Contributor Occupation* Public Relations Director |
| 3 | CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* 20181009 | (\$) Contribution Amount* \$1,000.00 |



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.

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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>Perry</td></tr><tr><td>Organization Name or Contributor Last Name, as applicable*</td><td>Contributor Suffix</td></tr><tr><td>Lorenz</td><td></td></tr></table> | Contributor Title | Contributor First Name* | | Perry | Organization Name or Contributor Last Name, as applicable* | Contributor Suffix | Lorenz | | | | | | | | | | | |
| Contributor Title | Contributor First Name* | | | | | | | | | | | | | | | | | | |
| | Perry | | | | | | | | | | | | | | | | | | |
| Organization Name or Contributor Last Name, as applicable* | Contributor Suffix | | | | | | | | | | | | | | | | | | |
| Lorenz | | | | | | | | | | | | | | | | | | | |
| 2 CONTRIBUTOR ADDRESS AND EMPLOYER | <table><tr><td>Contributor Address/ PO Box*</td><td colspan="2">Contributor Apartment or Suite Number</td></tr><tr><td>1311-A E. 6th St.</td><td colspan="2"></td></tr><tr><td>Contributor City*</td><td>Contributor State*</td><td>Contributor Zip Code*</td></tr><tr><td>Austin</td><td>TX</td><td>78702</td></tr><tr><td>Contributor Employer*</td><td colspan="2">Contributor Occupation*</td></tr><tr><td>Self</td><td colspan="2">Real Estate</td></tr></table> | Contributor Address/ PO Box* | Contributor Apartment or Suite Number | | 1311-A E. 6th St. | | | Contributor City* | Contributor State* | Contributor Zip Code* | Austin | TX | 78702 | Contributor Employer* | Contributor Occupation* | | Self | Real Estate | |
| Contributor Address/ PO Box* | Contributor Apartment or Suite Number | | | | | | | | | | | | | | | | | | |
| 1311-A E. 6th St. | | | | | | | | | | | | | | | | | | | |
| Contributor City* | Contributor State* | Contributor Zip Code* | | | | | | | | | | | | | | | | | |
| Austin | TX | 78702 | | | | | | | | | | | | | | | | | |
| Contributor Employer* | Contributor Occupation* | | | | | | | | | | | | | | | | | | |
| Self | Real Estate | | | | | | | | | | | | | | | | | | |
| 3 CONTRIBUTION DETAILS | <table><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td>20181015</td><td>\$5,000.00</td></tr></table> | Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | 20181015 | \$5,000.00 | | | | | | | | | | | | | | |
| Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | | | | | | | | | | | | | | | | | | |
| 20181015 | \$5,000.00 | | | | | | | | | | | | | | | | | | |



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

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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* Central Texas Building and Construction Trades Council | |
| 2 CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* 1106 Lavaca St. Contributor City* Austin Contributor Employer* | Contributor Apartment or Suite Number #201 Contributor State* TX Contributor Zip Code* 78701 Contributor Occupation* |
| 3 CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* 20181011 | (\$) Contribution Amount* \$1,000.00 |



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

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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* Stratus Properties Operating Co. | | |
| 2 CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* 212 Lavaca St. | Contributor Apartment or Suite Number | Contributor City* Austin |
| | Contributor State* TX | Contributor Zip Code* 78701 | Contributor Employer* |
| | Contributor Occupation* | | |
| 3 CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* 201801016 | (\$) Contribution Amount* \$10,000.00 | |



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.

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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* Brigid Shea Campaign | | | | |
| 2 CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* 2604 Geraghty Ave. | Contributor Apartment or Suite Number | Contributor City* Austin | Contributor State* TX | Contributor Zip Code* 78757 |
| | Contributor Employer* | Contributor Occupation* | | | |
| 3 CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* 20181016 | | (\$) Contribution Amount* \$400.00 | | |



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.

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

| | | | | |
|----------|--|--|-------------------------|--|
| 1 | CONTRIBUTOR NAME | Contributor Title | Contributor First Name* | |
| | | | Mark | |
| | <input checked="" type="checkbox"/> Contributor is an individual | Organization Name or Contributor Last Name, as applicable* | | Contributor Suffix |
| | | Littlefield | | |
| 2 | CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* | | Contributor Apartment or Suite Number |
| | | 7906 Henry Kinney Row | | |
| | | Contributor City* | | Contributor State* Contributor Zip Code* |
| | | Austin | | TX 78749 |
| | | Contributor Employer* | | Contributor Occupation* |
| | | Littlefield Consulting | | Consultant |
| 3 | CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* | | (\$) Contribution Amount* |
| | | 20181003 | | \$1,052.95 |



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.

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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* Focused Advocacy | | |
| 2 CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* 816 Congress Ave. | Contributor Apartment or Suite Number Ste. 370 | |
| | Contributor City* Austin | Contributor State* TX | Contributor Zip Code* 78701 |
| | Contributor Employer* | Contributor Occupation* | |
| 3 CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* 20181015 | | (*) Contribution Amount* \$2,631.89 |



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.

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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* Frederick, Perales, Allmon, & Rockwell | | | | |
| 2 CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* 1206 San Antonio Street | Contributor Apartment or Suite Number | Contributor City* Austin | Contributor State* TX | Contributor Zip Code* 78701 |
| | Contributor Employer* | Contributor Occupation* | | | |
| 3 CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* 20181008 | | (\$) Contribution Amount* \$263.47 | | |



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.

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| | | | |
|----------|---|---|---|
| 1 | CONTRIBUTOR NAME <input checked="" type="checkbox"/> Contributor is an individual | Contributor Title | Contributor First Name* Marisa |
| | | Organization Name or Contributor Last Name, as applicable* Perales | Contributor Suffix |
| 2 | CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* 2104 Willow St. | Contributor Apartment or Suite Number |
| | | Contributor City* Austin | Contributor State* TX |
| | | Contributor Zip Code* 78702 | |
| | | Contributor Employer* Frederick, Perales, Allmon & Rockwell P.C. | Contributor Occupation* Attorney |
| 3 | CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* 20181008 | (\$) Contribution Amount* \$105.58 |



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.

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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* Lauren |
| | | Organization Name or Contributor Last Name, as applicable* Rice | Contributor Suffix |
| 2 | CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* 1710 Shelbourne Drive | Contributor Apartment or Suite Number |
| | | Contributor City* Austin | Contributor State* TX |
| | | Contributor Zip Code* 78752 | |
| | | Contributor Employer* Frederick, Perales, Allmon & Rockwell P.C. | Contributor Occupation* Attorney |
| 3 | CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* 20181010 | (\$) Contribution Amount* \$105.58 |



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

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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* Lowerre | Contributor Suffix |
| 2 | CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* 1206 San Antonio Street | | Contributor Apartment or Suite Number | |
| | | Contributor City* Austin | | Contributor State* TX | Contributor Zip Code* 78701 |
| | | Contributor Employer* Self | | Contributor Occupation* Attorney | |
| 3 | CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* 20181008 | | (\$) Contribution Amount* \$100.00 | |



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

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| | | | | | |
|----------|---|--|---------------------------------|---|--------------------------------|
| 1 | CONTRIBUTOR NAME <input checked="" type="checkbox"/> Contributor is an individual | Contributor Title | Contributor First Name* Paul | | |
| | | Organization Name or Contributor Last Name, as applicable* | | Contributor Suffix | |
| | | Silver | | | |
| 2 | CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* 1900 Bremen St. | | Contributor Apartment or Suite Number | |
| | | Contributor City* Austin | | Contributor State* TX | Contributor Zip Code* 78703 |
| | | Contributor Employer* None | | Contributor Occupation* Retired | |
| 3 | CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* 20181014 | | (\$) Contribution Amount* \$26.53 | |



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

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| | | | | |
|----------|--|--|-------------------------|--|
| 1 | CONTRIBUTOR NAME | Contributor Title | Contributor First Name* | |
| | <input checked="" type="checkbox"/> Contributor is an individual | | Flannery | |
| | | Organization Name or Contributor Last Name, as applicable* | | Contributor Suffix |
| | | Bope | | |
| 2 | CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* | | Contributor Apartment or Suite Number |
| | | 1512 Holstein Dr | | |
| | | Contributor City* | | Contributor State* Contributor Zip Code* |
| | | Austin | | TX 78758 |
| | | Contributor Employer* | | Contributor Occupation* |
| | | Concierge Auctions | | Digital Marketing Manager |
| 3 | CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* | | (\$) Contribution Amount* |
| | | 20181016 | | \$26.63 |



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

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| | | | | | |
|----------|---|---|----------------------------------|---|--------------------------------|
| 1 | CONTRIBUTOR NAME <input checked="" type="checkbox"/> Contributor is an individual | Contributor Title | Contributor First Name* Jacob | | |
| | | Organization Name or Contributor Last Name, as applicable* Childress | | Contributor Suffix | |
| 2 | CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* 1811 Loreto Dr | | Contributor Apartment or Suite Number | |
| | | Contributor City* Austin | | Contributor State* TX | Contributor Zip Code* 78721 |
| | | Contributor Employer* Ping Identity | | Contributor Occupation* Software Engineer | |
| 3 | CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* 20181018 | | (\$) Contribution Amount* \$26.63 | |



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

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| | | | |
|--|---|--|--|
| 1 CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual | Organization Name or Contributor Last Name, as applicable* Liberal Austin Democrats | | |
| 2 CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* P.O. Box 49712 | 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)* 20181009 | (\$) Contribution Amount* \$250.00 | |



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.

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| | | | |
|----------|--|--|--|
| 1 | CONTRIBUTOR NAME | Contributor Title | Contributor First Name* |
| | | | Anne |
| | <input checked="" type="checkbox"/> Contributor is an individual | Organization Name or Contributor Last Name, as applicable* | Contributor Suffix |
| | | Peticolas | |
| 2 | CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* | Contributor Apartment or Suite Number |
| | | 5730 Abilene Trail | |
| | | Contributor City* | Contributor State* Contributor Zip Code* |
| | | Austin | TX 78749 |
| | | Contributor Employer* | Contributor Occupation* |
| | | University of Texas | Senior Systems Analyst |
| 3 | CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* | (\$) Contribution Amount* |
| | | 20181020 | \$25.00 |



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

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| | | | | |
|----------|--|--|-------------------------|--|
| 1 | CONTRIBUTOR NAME | Contributor Title | Contributor First Name* | |
| | | | Kristin | |
| | <input checked="" type="checkbox"/> Contributor is an individual | Organization Name or Contributor Last Name, as applicable* | | Contributor Suffix |
| | | Fine | | |
| 2 | CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* | | Contributor Apartment or Suite Number |
| | | 2008 Holland Ave | | Unit B |
| | | Contributor City* | | Contributor State* Contributor Zip Code* |
| | | Austin | | TX 78704 |
| | | Contributor Employer* | | Contributor Occupation* |
| | | RevUp Software | | Account Manager |
| 3 | CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* | | (\$) Contribution Amount* |
| | | 20181020 | | \$52.95 |



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

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|---|--|---------------------------------------|---------------------------|---------------------------------------|---------|--|--------------------|-------|--|-------------------|--------------------|-----------------------|--|--------|----|-------|--|-----------------------|--|-------------------------|--|------|--|-----|--|
| 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>Kelly</td></tr><tr><td>Organization Name or Contributor Last Name, as applicable*</td><td>Contributor Suffix</td></tr><tr><td>White</td><td></td></tr></table> | Contributor Title | Contributor First Name* | | Kelly | Organization Name or Contributor Last Name, as applicable* | Contributor Suffix | White | | | | | | | | | | | | | | | | | |
| Contributor Title | Contributor First Name* | | | | | | | | | | | | | | | | | | | | | | | | |
| | Kelly | | | | | | | | | | | | | | | | | | | | | | | | |
| Organization Name or Contributor Last Name, as applicable* | Contributor Suffix | | | | | | | | | | | | | | | | | | | | | | | | |
| White | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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">613 W. 33rd Str.</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">78705</td></tr><tr><td colspan="2">Contributor Employer*</td><td colspan="2">Contributor Occupation*</td></tr><tr><td colspan="2">SAFE</td><td colspan="2">CEO</td></tr></table> | Contributor Address/ PO Box* | | Contributor Apartment or Suite Number | | 613 W. 33rd Str. | | | | Contributor City* | Contributor State* | Contributor Zip Code* | | Austin | TX | 78705 | | Contributor Employer* | | Contributor Occupation* | | SAFE | | CEO | |
| Contributor Address/ PO Box* | | Contributor Apartment or Suite Number | | | | | | | | | | | | | | | | | | | | | | | |
| 613 W. 33rd Str. | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contributor City* | Contributor State* | Contributor Zip Code* | | | | | | | | | | | | | | | | | | | | | | | |
| Austin | TX | 78705 | | | | | | | | | | | | | | | | | | | | | | | |
| Contributor Employer* | | Contributor Occupation* | | | | | | | | | | | | | | | | | | | | | | | |
| SAFE | | CEO | | | | | | | | | | | | | | | | | | | | | | | |
| 3 CONTRIBUTION DETAILS | <table><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td>20181020</td><td>\$26.63</td></tr></table> | Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | 20181020 | \$26.63 | | | | | | | | | | | | | | | | | | | | |
| Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | | | | | | | | | | | | | | | | | | | | | | | | |
| 20181020 | \$26.63 | | | | | | | | | | | | | | | | | | | | | | | | |



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

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

| | | | |
|----------|--|--|---|
| 1 | CONTRIBUTOR NAME | Contributor Title <input type="text"/> | Contributor First Name* <input type="text" value="Roxanne"/> |
| | <input checked="" type="checkbox"/> Contributor is an individual | Organization Name or Contributor Last Name, as applicable* <input type="text" value="Elder"/> | Contributor Suffix <input type="text"/> |
| 2 | CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* <input type="text" value="P.O. Box 29179"/> | Contributor Apartment or Suite Number <input type="text"/> |
| | | Contributor City* <input type="text" value="Austin"/> | Contributor State* <input type="text" value="TX"/> |
| | | Contributor Zip Code* <input type="text" value="78755"/> | |
| | | Contributor Employer* <input type="text" value="Self"/> | Contributor Occupation* <input type="text" value="Social Entrepreneur"/> |
| 3 | CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* <input type="text" value="20181020"/> | (\$) Contribution Amount* <input type="text" value="\$100.00"/> |



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

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| | | | | | | | | | | | | | | | | | | | |
|---|---|-------------------------------|---------------------------------------|----------|-----------------|--|--------------------|-------------------|--------------------|-----------------------|--------|----|-------|-----------------------|-------------------------|--|-----------------------|----------|--|
| 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>James</td></tr><tr><td>Organization Name or Contributor Last Name, as applicable*</td><td>Contributor Suffix</td></tr><tr><td>Allison</td><td></td></tr></table> | Contributor Title | Contributor First Name* | | James | Organization Name or Contributor Last Name, as applicable* | Contributor Suffix | Allison | | | | | | | | | | | |
| Contributor Title | Contributor First Name* | | | | | | | | | | | | | | | | | | |
| | James | | | | | | | | | | | | | | | | | | |
| Organization Name or Contributor Last Name, as applicable* | Contributor Suffix | | | | | | | | | | | | | | | | | | |
| Allison | | | | | | | | | | | | | | | | | | | |
| 2 CONTRIBUTOR ADDRESS AND EMPLOYER | <table><tr><td>Contributor Address/ PO Box*</td><td colspan="2">Contributor Apartment or Suite Number</td></tr><tr><td>402 W. 12th St.</td><td colspan="2"></td></tr><tr><td>Contributor City*</td><td>Contributor State*</td><td>Contributor Zip Code*</td></tr><tr><td>Austin</td><td>TX</td><td>78701</td></tr><tr><td>Contributor Employer*</td><td colspan="2">Contributor Occupation*</td></tr><tr><td>Allison, Bass & Magee</td><td colspan="2">Attorney</td></tr></table> | Contributor Address/ PO Box* | Contributor Apartment or Suite Number | | 402 W. 12th St. | | | Contributor City* | Contributor State* | Contributor Zip Code* | Austin | TX | 78701 | Contributor Employer* | Contributor Occupation* | | Allison, Bass & Magee | Attorney | |
| Contributor Address/ PO Box* | Contributor Apartment or Suite Number | | | | | | | | | | | | | | | | | | |
| 402 W. 12th St. | | | | | | | | | | | | | | | | | | | |
| Contributor City* | Contributor State* | Contributor Zip Code* | | | | | | | | | | | | | | | | | |
| Austin | TX | 78701 | | | | | | | | | | | | | | | | | |
| Contributor Employer* | Contributor Occupation* | | | | | | | | | | | | | | | | | | |
| Allison, Bass & Magee | Attorney | | | | | | | | | | | | | | | | | | |
| 3 CONTRIBUTION DETAILS | <table><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td>20181020</td><td>\$52.95</td></tr></table> | Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | 20181020 | \$52.95 | | | | | | | | | | | | | | |
| Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | | | | | | | | | | | | | | | | | | |
| 20181020 | \$52.95 | | | | | | | | | | | | | | | | | | |



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

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| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---------------------------------------|---------------------------|---------------------------------------|----------|--|--|---------|--|--------------------|--|--------------------|-----------------------|--------|--|----|-------|-----------------------|--|-------------------------|--|------------------|--|----------|--|
| 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>Bert</td></tr><tr><td colspan="2">Organization Name or Contributor Last Name, as applicable*</td></tr><tr><td colspan="2">Pluymen</td></tr><tr><td colspan="2">Contributor Suffix</td></tr><tr><td colspan="2"></td></tr></table> | Contributor Title | Contributor First Name* | | Bert | Organization Name or Contributor Last Name, as applicable* | | Pluymen | | Contributor Suffix | | | | | | | | | | | | | | | |
| Contributor Title | Contributor First Name* | | | | | | | | | | | | | | | | | | | | | | | | |
| | Bert | | | | | | | | | | | | | | | | | | | | | | | | |
| Organization Name or Contributor Last Name, as applicable* | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pluymen | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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">2705 Bee Caves Road, Suite 225</td><td colspan="2"></td></tr><tr><td colspan="2">Contributor City*</td><td>Contributor State*</td><td>Contributor Zip Code*</td></tr><tr><td colspan="2">Austin</td><td>TX</td><td>78746</td></tr><tr><td colspan="2">Contributor Employer*</td><td colspan="2">Contributor Occupation*</td></tr><tr><td colspan="2">Pluymen Law PLLC</td><td colspan="2">Attorney</td></tr></table> | Contributor Address/ PO Box* | | Contributor Apartment or Suite Number | | 2705 Bee Caves Road, Suite 225 | | | | Contributor City* | | Contributor State* | Contributor Zip Code* | Austin | | TX | 78746 | Contributor Employer* | | Contributor Occupation* | | Pluymen Law PLLC | | Attorney | |
| Contributor Address/ PO Box* | | Contributor Apartment or Suite Number | | | | | | | | | | | | | | | | | | | | | | | |
| 2705 Bee Caves Road, Suite 225 | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contributor City* | | Contributor State* | Contributor Zip Code* | | | | | | | | | | | | | | | | | | | | | | |
| Austin | | TX | 78746 | | | | | | | | | | | | | | | | | | | | | | |
| Contributor Employer* | | Contributor Occupation* | | | | | | | | | | | | | | | | | | | | | | | |
| Pluymen Law PLLC | | Attorney | | | | | | | | | | | | | | | | | | | | | | | |
| 3 CONTRIBUTION DETAILS | <table><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td>20181020</td><td>\$105.58</td></tr></table> | Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | 20181020 | \$105.58 | | | | | | | | | | | | | | | | | | | | |
| Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | | | | | | | | | | | | | | | | | | | | | | | | |
| 20181020 | \$105.58 | | | | | | | | | | | | | | | | | | | | | | | | |



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

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|---|---|---------------------------------------|---------------------------|---------------------------------------|---------|--|--------------------|--------|--|-------------------|--------------------|-----------------------|--|--------|----|-------|--|-----------------------|--|-------------------------|--|---------------------|--|-----------|--|
| 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>Wendy</td></tr><tr><td>Organization Name or Contributor Last Name, as applicable*</td><td>Contributor Suffix</td></tr><tr><td>Gordon</td><td></td></tr></table> | Contributor Title | Contributor First Name* | | Wendy | Organization Name or Contributor Last Name, as applicable* | Contributor Suffix | Gordon | | | | | | | | | | | | | | | | | |
| Contributor Title | Contributor First Name* | | | | | | | | | | | | | | | | | | | | | | | | |
| | Wendy | | | | | | | | | | | | | | | | | | | | | | | | |
| Organization Name or Contributor Last Name, as applicable* | Contributor Suffix | | | | | | | | | | | | | | | | | | | | | | | | |
| Gordon | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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">7130 Valburn Drive</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">Ecologia Consulting</td><td colspan="2">Scientist</td></tr></table> | Contributor Address/ PO Box* | | Contributor Apartment or Suite Number | | 7130 Valburn Drive | | | | Contributor City* | Contributor State* | Contributor Zip Code* | | Austin | TX | 78731 | | Contributor Employer* | | Contributor Occupation* | | Ecologia Consulting | | Scientist | |
| Contributor Address/ PO Box* | | Contributor Apartment or Suite Number | | | | | | | | | | | | | | | | | | | | | | | |
| 7130 Valburn Drive | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contributor City* | Contributor State* | Contributor Zip Code* | | | | | | | | | | | | | | | | | | | | | | | |
| Austin | TX | 78731 | | | | | | | | | | | | | | | | | | | | | | | |
| Contributor Employer* | | Contributor Occupation* | | | | | | | | | | | | | | | | | | | | | | | |
| Ecologia Consulting | | Scientist | | | | | | | | | | | | | | | | | | | | | | | |
| 3 CONTRIBUTION DETAILS | <table><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td>20181021</td><td>\$26.63</td></tr></table> | Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | 20181021 | \$26.63 | | | | | | | | | | | | | | | | | | | | |
| Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | | | | | | | | | | | | | | | | | | | | | | | | |
| 20181021 | \$26.63 | | | | | | | | | | | | | | | | | | | | | | | | |



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

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| | | | | | | | | | | | | | | | | | | | |
|---|---|-------------------------------|---------------------------------------|----------|------------------|--|--------------------|-------------------|--------------------|-----------------------|--------|----|-------|-----------------------|-------------------------|--|-----|-------------------|--|
| 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>Jim</td></tr><tr><td>Organization Name or Contributor Last Name, as applicable*</td><td>Contributor Suffix</td></tr><tr><td>Marston</td><td></td></tr></table> | Contributor Title | Contributor First Name* | | Jim | Organization Name or Contributor Last Name, as applicable* | Contributor Suffix | Marston | | | | | | | | | | | |
| Contributor Title | Contributor First Name* | | | | | | | | | | | | | | | | | | |
| | Jim | | | | | | | | | | | | | | | | | | |
| Organization Name or Contributor Last Name, as applicable* | Contributor Suffix | | | | | | | | | | | | | | | | | | |
| Marston | | | | | | | | | | | | | | | | | | | |
| 2 CONTRIBUTOR ADDRESS AND EMPLOYER | <table><tr><td>Contributor Address/ PO Box*</td><td colspan="2">Contributor Apartment or Suite Number</td></tr><tr><td>2810 Townes Lane</td><td colspan="2"></td></tr><tr><td>Contributor City*</td><td>Contributor State*</td><td>Contributor Zip Code*</td></tr><tr><td>Austin</td><td>TX</td><td>78703</td></tr><tr><td>Contributor Employer*</td><td colspan="2">Contributor Occupation*</td></tr><tr><td>EDF</td><td colspan="2">Regional Director</td></tr></table> | Contributor Address/ PO Box* | Contributor Apartment or Suite Number | | 2810 Townes Lane | | | Contributor City* | Contributor State* | Contributor Zip Code* | Austin | TX | 78703 | Contributor Employer* | Contributor Occupation* | | EDF | Regional Director | |
| Contributor Address/ PO Box* | Contributor Apartment or Suite Number | | | | | | | | | | | | | | | | | | |
| 2810 Townes Lane | | | | | | | | | | | | | | | | | | | |
| Contributor City* | Contributor State* | Contributor Zip Code* | | | | | | | | | | | | | | | | | |
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| Contributor Employer* | Contributor Occupation* | | | | | | | | | | | | | | | | | | |
| EDF | Regional Director | | | | | | | | | | | | | | | | | | |
| 3 CONTRIBUTION DETAILS | <table><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td>20181021</td><td>\$105.58</td></tr></table> | Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | 20181021 | \$105.58 | | | | | | | | | | | | | | |
| Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | | | | | | | | | | | | | | | | | | |
| 20181021 | \$105.58 | | | | | | | | | | | | | | | | | | |

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