



Report Of Direct Campaign Expenditures: Schedule ATX.1

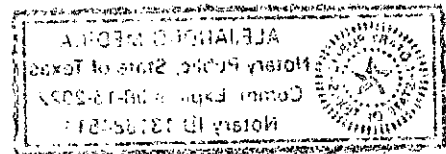
(Previously Independent Expenditures not by a Candidate)

☐ Office Use Only

OCC RECEIVED AT
OCT 22 '18 PM2:17

1 INDIVIDUAL OR ORGANIZATION NAME <input type="checkbox"/> Filer is an individual	Committee or Organization Name* <div>IndyAustin PAC</div>
2 INDIVIDUAL OR ORGANIZATION ADDRESS	Address/ PO Box* <div>PO BOX 41479</div> City* <div>Austin</div> Apartment or Suite Number <div></div> State* <div>TX</div> Zip Code* <div>78704</div>
3 COMMITTEE TREASURER NAME (if applicable)	Title <div></div> First Name <div>Linda</div> Middle Initial <div>L</div> Last Name <div>Curtis</div> Suffix <div></div>
4 COMMITTEE TREASURER ADDRESS (if applicable)	Address/ PO Box <div>150 Southshore Road</div> City <div>Bastrop</div> Apartment or Suite Number <div></div> State <div>TX</div> Zip Code <div>78602</div>
5 REPORT DATE	Date Filed (yyyymmdd)* <div>20181022</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: 10/22/18


AFFIANT'S SIGNATURE

LINDA CURTIS

PRINT NAME

STATE OF TEXAS

COUNTY OF TRAVIS

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

Linda Curtis

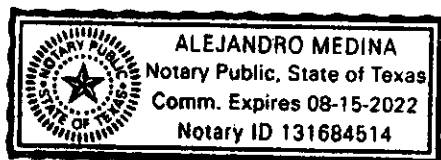
On the 22nd day of October, 2018, to certify which witness my hand and official seal.



Notary Public in and for the State of Texas

Alejandro Medina

Typed or Printed Name of Notary





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 <div></div> Payee First Name* <div>Deborah</div> Organization Name or Payee Last Name, as applicable* <div>Russell</div> Payee Suffix <div></div>
2 PAYEE ADDRESS	Payee Address/ PO Box* <div>2430 Cromwell Circle</div> Payee Apartment or Suite Number <div>1105</div> Payee City* <div>Austin</div> Payee State* <div>TX</div> Payee Zip Code* <div>78741</div>
3 EXPENDITURE DETAILS	Category* <div>Salaries/Wages/Contract labor</div> (\$) Expenditure Amount* <div>\$600.00</div> Description (If Category is "Other") <div></div> Expenditure Date* <div>20181019</div>

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)
Oppose Adler	Steve	Austin Mayor	Austin Mayor
Oppose Renteria	Sabino "Pio"	District 3, City Council	District 3, City Council
Oppose Skidmore	Danielle	District 9, City Council	
Support Morrison	Laura	Austin Mayor	
Support Phelps	Todd	Austin Mayor	
Support Valadez	James	District 3, City Council	
Support Almanza	Susana	District 3, City Council	
Support Levinsky	Bobby	District 8, City Council	
Support Avini	Mitrah	District 1, City Council	
Support O'Neal	Linda	District 9, City Council	
Support Tovo	Kathie	District 9, City Council	
Support Prop J			



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* Deep Eddy Media		
2 PAYEE ADDRESS	Payee Address/ PO Box* 409 Deep Eddy Ave Payee City* Austin	Payee Apartment or Suite Number Payee State* TX	Payee Zip Code* 78703
3 EXPENDITURE DETAILS	Category* Printing Expense Description (If Category is "Other") IndyAustin campaign flier	(\$) Expenditure Amount* \$2,435.63 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)
Ordinance w/r/t sport/entertainment stadiums			
Oppose - Renteria	Sabino ("Pio")	City Council District 3	City Council District 3
Oppose - Skidmore	Danielle	City Council District 9	
Oppose - Adler	Steve	Mayor	Mayor
Support - Prop J			
Support Morrison	Laura	Mayor	
Support Phelps	Todd	Mayor	
Support Valadez	James	District 3, City Council	
Support Almanza	Susana	District 3, City Council	
Support Avini	Mitrah	District 1, City Council	
Support O'Neal	Linda	District 9, City council	
Support Levinsky	Bobby	District 8, City Council	
Support Tovo	Kathie	District 9, City Council	



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* Facebook		
2	PAYEE ADDRESS	Payee Address/ PO Box* 1 Hacker Way	Payee Apartment or Suite Number	
		Payee City* Menlo Park	Payee State* CA	Payee Zip Code* 94025
3	EXPENDITURE DETAILS	Category* Advertising Expense	(\$) Expenditure Amount* \$355.81	
		Description (If Category is "Other") video and meme ads for IndyAustin	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)
Ordinance w/r/t sport/entertainment stadiums			
Oppose Adler	Steve	Austin Mayor	Austin Mayor
Oppose Renteria	Sabino "Pio"	District 3 City Council	Dist. 3 City Council
Oppose Skidmore	Danielle	District 9, City Council	
Support Morrison	Laura	Austin Mayor	
Support Phelps	Todd	Austin Mayor	
Support Valadez	James	District 3, City Council	
Support Almanza	Susana	District 3, City Council	
Support Levinsky	Bobbby	District 8, City Council	
Support Avini	Mitrah	District 1, City Council	
Support O'Neal	Linda	District 9, City council	
Support Tovo	Kathie	District 9, City Council	
Support Prop J			

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>The Bumpersticker</div>		
2 PAYEE ADDRESS	Payee Address/ PO Box* <div>612 W 34th St</div> Payee City* <div>Austin</div>		Payee Apartment or Suite Number <div></div> Payee State* <div>TX</div> Payee Zip Code* <div>78705</div>
3 EXPENDITURE DETAILS	Category* <div>Printing Expense</div> Description (If Category is "Other") <div></div>		(\$) Expenditure Amount* <div>\$72.58</div> Expenditure Date* <div>20181017</div>

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

[illegible]



Revised 8/4/2016
Page 7 of 11

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>Elisabeth.Co</div>		
2 PAYEE ADDRESS	Payee Address/ PO Box * <div>7631 Highway 290 West</div> Payee City * <div>Austin</div>		Payee Apartment or Suite Number <div>#525</div> Payee State * <div>TX</div> Payee Zip Code * <div>78736</div>
3 EXPENDITURE DETAILS	Category * <div>Other (use Description field)</div> Description (If Category is "Other") <div>Web design</div>		(\$) Expenditure Amount * <div>\$50.00</div> Expenditure Date * <div>20181017</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* CAC Advising Group		
2	PAYEE ADDRESS	Payee Address/ PO Box* 1624 Market St	Payee Apartment or Suite Number	
		Payee City* Denver	Payee State* CO	Payee Zip Code* 80202
3	EXPENDITURE DETAILS	Category* Salaries/Wages/Contract labor	(\$) Expenditure Amount* \$10,483.00	
		Description (If Category is "Other")	Expenditure Date*	

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)
Petitioning for Sports/Entertainment Venue Ord			



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* Robert Epstein		
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* 5000 Plaza on the Lake	Contributor Apartment or Suite Number 	Contributor City* Austin
	Contributor State* TX	Contributor Zip Code* 78746	Contributor Employer* PCM LLC
	Contributor Occupation* General Partner		
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20181019	(\$) Contribution Amount* \$24,000.00	

Add Another Contribution Page



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* <div>IndyAustin PAC</div>																
2 INDIVIDUAL OR ORGANIZATION ADDRESS	<table><tr><td colspan="2">Address/ PO Box*</td><td colspan="2">Apartment or Suite Number</td></tr><tr><td colspan="2"><div>PO BOX 41479</div></td><td colspan="2"><div></div></td></tr><tr><td>City*</td><td>State*</td><td colspan="2">Zip Code*</td></tr><tr><td><div>Austin</div></td><td><div>TX</div></td><td colspan="2"><div>78704</div></td></tr></table>	Address/ PO Box*		Apartment or Suite Number		<div>PO BOX 41479</div>		<div></div>		City*	State*	Zip Code*		<div>Austin</div>	<div>TX</div>	<div>78704</div>	
Address/ PO Box*		Apartment or Suite Number															
<div>PO BOX 41479</div>		<div></div>															
City*	State*	Zip Code*															
<div>Austin</div>	<div>TX</div>	<div>78704</div>															
3 COMMITTEE TREASURER NAME (if applicable)	<table><tr><td>Title</td><td>First Name</td><td>Middle Initial</td></tr><tr><td><div></div></td><td><div>Linda</div></td><td><div>J</div></td></tr><tr><td colspan="2">Last Name</td><td>Suffix</td></tr><tr><td colspan="2"><div>Curtis</div></td><td><div></div></td></tr></table>	Title	First Name	Middle Initial	<div></div>	<div>Linda</div>	<div>J</div>	Last Name		Suffix	<div>Curtis</div>		<div></div>				
Title	First Name	Middle Initial															
<div></div>	<div>Linda</div>	<div>J</div>															
Last Name		Suffix															
<div>Curtis</div>		<div></div>															
4 COMMITTEE TREASURER ADDRESS (if applicable)	<table><tr><td colspan="2">Address/ PO Box</td><td colspan="2">Apartment or Suite Number</td></tr><tr><td colspan="2"><div>150 Southshore Road</div></td><td colspan="2"><div></div></td></tr><tr><td>City</td><td>State</td><td colspan="2">Zip Code</td></tr><tr><td><div>Bastrop</div></td><td><div>TX</div></td><td colspan="2"><div>78602</div></td></tr></table>	Address/ PO Box		Apartment or Suite Number		<div>150 Southshore Road</div>		<div></div>		City	State	Zip Code		<div>Bastrop</div>	<div>TX</div>	<div>78602</div>	
Address/ PO Box		Apartment or Suite Number															
<div>150 Southshore Road</div>		<div></div>															
City	State	Zip Code															
<div>Bastrop</div>	<div>TX</div>	<div>78602</div>															
5 REPORT DATE	Date Filed (yyyymmdd)* <div>20181022</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: _____

AFFIANT'S SIGNATURE

PRINT NAME

STATE OF TEXAS

COUNTY OF TRAVIS

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

On the _____ day of _____, _____, to certify which witness my hand and official seal.

Notary Public in and for the State of Texas

Typed or Printed Name of Notary



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	<table> <tr> <td>Payee Title</td> <td>Payee First Name*</td> </tr> <tr> <td></td> <td>Deborah</td> </tr> <tr> <td>Organization Name or Payee Last Name, as applicable*</td> <td>Payee Suffix</td> </tr> <tr> <td>Russell</td> <td></td> </tr> </table>	Payee Title	Payee First Name*		Deborah	Organization Name or Payee Last Name, as applicable*	Payee Suffix	Russell					
Payee Title	Payee First Name*												
	Deborah												
Organization Name or Payee Last Name, as applicable*	Payee Suffix												
Russell													
2 PAYEE ADDRESS	<table> <tr> <td>Payee Address/ PO Box*</td> <td>Payee Apartment or Suite Number</td> </tr> <tr> <td>2430 Cromwell Circle</td> <td>1105</td> </tr> <tr> <td>Payee City*</td> <td>Payee State*</td> </tr> <tr> <td>Austin</td> <td>TX</td> </tr> <tr> <td></td> <td>Payee Zip Code*</td> </tr> <tr> <td></td> <td>78741</td> </tr> </table>	Payee Address/ PO Box*	Payee Apartment or Suite Number	2430 Cromwell Circle	1105	Payee City*	Payee State*	Austin	TX		Payee Zip Code*		78741
Payee Address/ PO Box*	Payee Apartment or Suite Number												
2430 Cromwell Circle	1105												
Payee City*	Payee State*												
Austin	TX												
	Payee Zip Code*												
	78741												
3 EXPENDITURE DETAILS	<table> <tr> <td>Category*</td> <td>(\$) Expenditure Amount*</td> </tr> <tr> <td>Salaries/Wages/Contract labor</td> <td>\$600.00</td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date*</td> </tr> <tr> <td></td> <td>20181019</td> </tr> </table>	Category*	(\$) Expenditure Amount*	Salaries/Wages/Contract labor	\$600.00	Description (If Category is "Other")	Expenditure Date*		20181019				
Category*	(\$) Expenditure Amount*												
Salaries/Wages/Contract labor	\$600.00												
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)
Oppose Adler	Steve	Austin Mayor	Austin Mayor
Oppose Renteria	Sabino "Pio"	District 3, City Council	District 3, City Council
Oppose Skidmore	Danielle	District 9, City Council	
Support Morrison	Laura	Austin Mayor	
Support Phelps	Todd	Austin Mayor	
Support Valadez	James	District 3, City Council	
Support Almanza	Susana	District 3, City Council	
Support Levinsky	Bobby	District 8, City Council	
Support Avini	Mitrah	District 1, City Council	
Support O'Neal	Linda	District 9, City Council	
Support Tovo	Kathie	District 9, City Council	
Support Prop J			



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* Deep Eddy Media		
2 PAYEE ADDRESS	Payee Address/ PO Box* 409 Deep Eddy Ave Payee City* Austin		Payee Apartment or Suite Number Payee State* TX Payee Zip Code* 78703
3 EXPENDITURE DETAILS	Category* Printing Expense Description (If Category is "Other") IndyAustin campaign flier		(\$) Expenditure Amount* \$2,435.63 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)
Ordinance w/r/t sport/entertainment stadiums			
Oppose - Renteria	Sabino ("Pio")	City Council District 3	City Council District 3
Oppose - Skidmore	Danielle	City Council District 9	
Oppose - Adler	Steve	Mayor	Mayor
Support - Prop J			
Support Morrison	Laura	Mayor	
Support Phelps	Todd	Mayor	
Support Valadez	James	District 3, City Council	
Support Almanza	Susana	District 3, City Council	
Support Avini	Mitrah	District 1, City Council	
Support O'Neal	Linda	District 9, City council	
Support Levinsky	Bobby	District 8, City Council	
Support Tovo	Kathie	District 9, City Council	



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* Facebook		
2 PAYEE ADDRESS	Payee Address/ PO Box* 1 Hacker Way Payee City* Menlo Park		Payee Apartment or Suite Number Payee State* CA Payee Zip Code* 94025
3 EXPENDITURE DETAILS	Category* Advertising Expense Description (If Category is "Other") video and meme ads for IndyAustin		(\$) Expenditure Amount* \$355.81 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)
Ordinance w/r/t sport/entertainment stadiums			
Oppose Adler	Steve	Austin Mayor	Austin Mayor
Oppose Renteria	Sabino "Pio"	District 3 City Council	Dist. 3 City Council
Oppose Skidmore	Danielle	District 9, City Council	
Support Morrison	Laura	Austin Mayor	
Support Phelps	Todd	Austin Mayor	
Support Valadez	James	District 3, City Council	
Support Almanza	Susana	District 3, City Council	
Support Levinsky	Bobbby	District 8, City Council	
Support Avini	Mitrah	District 1, City Council	
Support O'Neal	Linda	District 9, City council	
Support Tovo	Kathie	District 9, City Council	
Support Prop J			



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Expenditure

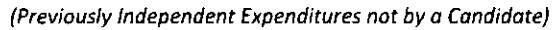
Itemize each direct campaign expenditure in Sections 1-4.

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* The Bumpersticker		
2	PAYEE ADDRESS	Payee Address/ PO Box* 612 W 34th St	Payee Apartment or Suite Number	
		Payee City* Austin	Payee State* TX	Payee Zip Code* 78705
3	EXPENDITURE DETAILS	Category* Printing Expense	(\$) Expenditure Amount* \$72.58	
		Description (If Category is "Other")	Expenditure Date* 20181017	

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 - Adler	Steve	Mayor	Mayor



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>Elisabeth.Co</div>	
2 PAYEE ADDRESS	Payee Address/ PO Box* <div>7631 Highway 290 West</div> Payee City* <div>Austin</div>	Payee Apartment or Suite Number <div>#525</div> Payee State* <div>TX</div> Payee Zip Code* <div>78736</div>
3 EXPENDITURE DETAILS	Category* <div>Other (use Description field)</div> Description (If Category is "Other") <div>Web design</div>	(\$) Expenditure Amount* <div>\$50.00</div> Expenditure Date* <div>20181017</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 <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">Lucas</td> </tr> <tr> <td colspan="2">Organization Name or Payee Last Name, as applicable*</td> <td>Payee Suffix</td> </tr> <tr> <td colspan="2">Burdick</td> <td></td> </tr> </table>	Payee Title	Payee First Name*			Lucas		Organization Name or Payee Last Name, as applicable*		Payee Suffix	Burdick						
Payee Title	Payee First Name*																
	Lucas																
Organization Name or Payee Last Name, as applicable*		Payee Suffix															
Burdick																	
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">1706 E 32nd St</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">78722</td> </tr> </table>	Payee Address/ PO Box*		Payee Apartment or Suite Number		1706 E 32nd St				Payee City*	Payee State*	Payee Zip Code*		Austin	TX	78722	
Payee Address/ PO Box*		Payee Apartment or Suite Number															
1706 E 32nd St																	
Payee City*	Payee State*	Payee Zip Code*															
Austin	TX	78722															
3 EXPENDITURE DETAILS	<table border="1"> <tr> <td>Category*</td> <td>(\$) Expenditure Amount*</td> </tr> <tr> <td>Salaries/Wages/Contract labor</td> <td>\$240.00</td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date*</td> </tr> <tr> <td>help with campaign finance reports</td> <td>20181022</td> </tr> </table>	Category*	(\$) Expenditure Amount*	Salaries/Wages/Contract labor	\$240.00	Description (If Category is "Other")	Expenditure Date*	help with campaign finance reports	20181022								
Category*	(\$) Expenditure Amount*																
Salaries/Wages/Contract labor	\$240.00																
Description (If Category is "Other")	Expenditure Date*																
help with campaign finance reports	20181022																

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* CAC Advising Group		
2	PAYEE ADDRESS	Payee Address/ PO Box* 1624 Market St	Payee Apartment or Suite Number	
		Payee City* Denver	Payee State* CO	Payee Zip Code* 80202
3	EXPENDITURE DETAILS	Category* Salaries/Wages/Contract labor	(\$) Expenditure Amount* \$10,483.00	
		Description (If Category is "Other")	Expenditure Date*	

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)
Petitioning for Sports/Entertainment Venue Ord			



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* Robert Epstein		
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* 5000 Plaza on the Lake	Contributor Apartment or Suite Number 	Contributor City* Austin
	Contributor State* TX	Contributor Zip Code* 78746	Contributor Employer* PCM LLC
	Contributor Occupation* General Partner		
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20181019	(\$) Contribution Amount* \$24,000.00	

Add Another Contribution Page