



# Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

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OCC RECEIVED AT  
OCT 24 '18 PM2:59

<b>1</b>  <b>INDIVIDUAL OR ORGANIZATION NAME</b>  <input type="checkbox"/> Filer is an individual	<b>Committee or Organization Name*</b> <div>Keep Austin Affordable</div>												
<b>2</b>  <b>INDIVIDUAL OR ORGANIZATION ADDRESS</b>	<table><tr><td colspan="2"><b>Address/ PO Box*</b></td><td><b>Apartment or Suite Number</b></td></tr><tr><td colspan="2"><div>P.O. Box 1136</div></td><td><div></div></td></tr><tr><td><b>City*</b></td><td><b>State*</b></td><td><b>Zip Code*</b></td></tr><tr><td><div>Austin</div></td><td><div>TX</div></td><td><div>78767</div></td></tr></table>	<b>Address/ PO Box*</b>		<b>Apartment or Suite Number</b>	<div>P.O. Box 1136</div>		<div></div>	<b>City*</b>	<b>State*</b>	<b>Zip Code*</b>	<div>Austin</div>	<div>TX</div>	<div>78767</div>
<b>Address/ PO Box*</b>		<b>Apartment or Suite Number</b>											
<div>P.O. Box 1136</div>		<div></div>											
<b>City*</b>	<b>State*</b>	<b>Zip Code*</b>											
<div>Austin</div>	<div>TX</div>	<div>78767</div>											
<b>3</b>  <b>COMMITTEE TREASURER NAME (if applicable)</b>	<table><tr><td><b>Title</b></td><td><b>First Name</b></td><td><b>Middle Initial</b></td></tr><tr><td><div></div></td><td><div>Ed</div></td><td><div></div></td></tr><tr><td colspan="2"><b>Last Name</b></td><td><b>Suffix</b></td></tr><tr><td colspan="2"><div>McHorse</div></td><td><div></div></td></tr></table>	<b>Title</b>	<b>First Name</b>	<b>Middle Initial</b>	<div></div>	<div>Ed</div>	<div></div>	<b>Last Name</b>		<b>Suffix</b>	<div>McHorse</div>		<div></div>
<b>Title</b>	<b>First Name</b>	<b>Middle Initial</b>											
<div></div>	<div>Ed</div>	<div></div>											
<b>Last Name</b>		<b>Suffix</b>											
<div>McHorse</div>		<div></div>											
<b>4</b>  <b>COMMITTEE TREASURER ADDRESS (if applicable)</b>	<table><tr><td><b>Address/ PO Box</b></td><td><b>Apartment or Suite Number</b></td></tr><tr><td><div>600 Congress Ave</div></td><td><div>Ste. 2100</div></td></tr><tr><td><b>City</b></td><td><b>State</b></td><td><b>Zip Code</b></td></tr><tr><td><div>Austin</div></td><td><div>TX</div></td><td><div>78701</div></td></tr></table>	<b>Address/ PO Box</b>	<b>Apartment or Suite Number</b>	<div>600 Congress Ave</div>	<div>Ste. 2100</div>	<b>City</b>	<b>State</b>	<b>Zip Code</b>	<div>Austin</div>	<div>TX</div>	<div>78701</div>		
<b>Address/ PO Box</b>	<b>Apartment or Suite Number</b>												
<div>600 Congress Ave</div>	<div>Ste. 2100</div>												
<b>City</b>	<b>State</b>	<b>Zip Code</b>											
<div>Austin</div>	<div>TX</div>	<div>78701</div>											
<b>5</b>  <b>REPORT DATE</b>	<b>Date Filed (yyyymmdd)*</b> <div>20181024</div>												

\* 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: Oct 24, 2018

AFFIANT'S SIGNATURE

Edward McHorse

PRINT NAME

STATE OF TEXAS

COUNTY OF TRAVIS

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

Edward McHorse

On the 24th day of October, 2018, to certify which witness my hand and official seal.

Notary Public in and for the State of Texas



Typed or Printed Name of Notary





Revised 8/4/2016  
Page 4 of 22



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## Contribution

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

<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input checked="" type="checkbox"/> Contributor is an individual	<table><tr><td>Contributor Title</td><td>Contributor First Name*</td></tr><tr><td></td><td>Lucy</td></tr><tr><td colspan="2">Organization Name or Contributor Last Name, as applicable*</td></tr><tr><td colspan="2">Johnson</td></tr><tr><td colspan="2">Contributor Suffix</td></tr><tr><td colspan="2"></td></tr></table>	Contributor Title	Contributor First Name*		Lucy	Organization Name or Contributor Last Name, as applicable*		Johnson		Contributor Suffix															
Contributor Title	Contributor First Name*																								
	Lucy																								
Organization Name or Contributor Last Name, as applicable*																									
Johnson																									
Contributor Suffix																									
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	<table><tr><td colspan="2">Contributor Address/ PO Box*</td><td colspan="2">Contributor Apartment or Suite Number</td></tr><tr><td colspan="2">1921 Lisa Lane</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">San Marcos</td><td>TX</td><td>78666</td></tr><tr><td colspan="2">Contributor Employer*</td><td colspan="2">Contributor Occupation*</td></tr><tr><td colspan="2"></td><td colspan="2">Consultant</td></tr></table>	Contributor Address/ PO Box*		Contributor Apartment or Suite Number		1921 Lisa Lane				Contributor City*		Contributor State*	Contributor Zip Code*	San Marcos		TX	78666	Contributor Employer*		Contributor Occupation*				Consultant	
Contributor Address/ PO Box*		Contributor Apartment or Suite Number																							
1921 Lisa Lane																									
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San Marcos		TX	78666																						
Contributor Employer*		Contributor Occupation*																							
		Consultant																							
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	<table><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td>20181014</td><td>\$526.63</td></tr></table>	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*	20181014	\$526.63																				
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<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* <div>Balcones Recycling</div>	
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	Contributor Address/ PO Box* <div>9301 Johnny Morris Rd</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>78724</div> Contributor Occupation* <div></div>
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	Contribution Date (yyyymmdd)* <div>20181015</div>	(\$) Contribution Amount* <div>\$5,000.00</div>



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<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* <div>McLean &amp; Howard L.L.P.</div>		
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	Contributor Address/ PO Box* <div>901 S. Mopac Expwy.</div> Contributor City* <div>Austin</div> Contributor Employer* <div></div>	Contributor Apartment or Suite Number <div>Bldg 2, Ste. 225</div> Contributor State* <div>TX</div>	Contributor Zip Code* <div>78746</div> Contributor Occupation* <div></div>
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	Contribution Date (yyyymmdd)* <div>20181016</div> (\$ ) Contribution Amount* <div>\$1,500.00</div>		



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<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input checked="" type="checkbox"/> Contributor is an individual	Contributor Title  Contributor First Name* Jeff  Organization Name or Contributor Last Name, as applicable* Howard  Contributor Suffix 
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	Contributor Address/ PO Box* 5436 Moon Shadow Dr  Contributor City* Austin  Contributor State* TX  Contributor Zip Code* 78735  Contributor Employer*  Contributor Occupation* Attorney
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	Contribution Date (yyyymmdd)* 20181016  (\$) Contribution Amount* \$1,000.00





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<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* <div>Greenbelt Solar</div>		
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	Contributor Address/ PO Box* <div>4808 Broken Bow PAss</div> Contributor City* <div>Austin</div> Contributor Employer* <div></div>	Contributor Apartment or Suite Number <div></div> Contributor State* <div>TX</div> Contributor Occupation* <div></div>	Contributor Zip Code* <div>78745208</div>
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	Contribution Date (yyyymmdd)* <div>20181016</div> (\$ Contribution Amount* <div>\$526.63</div>		



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<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input checked="" type="checkbox"/> Contributor is an individual	<table><tr><td>Contributor Title</td><td>Contributor First Name*</td></tr><tr><td></td><td>Ross</td></tr><tr><td colspan="2">Organization Name or Contributor Last Name, as applicable*</td></tr><tr><td colspan="2">Wilson</td></tr><tr><td colspan="2">Contributor Suffix</td></tr><tr><td colspan="2"></td></tr></table>	Contributor Title	Contributor First Name*		Ross	Organization Name or Contributor Last Name, as applicable*		Wilson		Contributor Suffix															
Contributor Title	Contributor First Name*																								
	Ross																								
Organization Name or Contributor Last Name, as applicable*																									
Wilson																									
Contributor Suffix																									
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	<table><tr><td colspan="2">Contributor Address/ PO Box*</td><td colspan="2">Contributor Apartment or Suite Number</td></tr><tr><td colspan="2">1310 S 1st Street</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">78704</td></tr><tr><td colspan="2">Contributor Employer*</td><td colspan="2">Contributor Occupation*</td></tr><tr><td colspan="2"></td><td colspan="2">Real Estate/architect</td></tr></table>	Contributor Address/ PO Box*		Contributor Apartment or Suite Number		1310 S 1st Street				Contributor City*	Contributor State*	Contributor Zip Code*		Austin	TX	78704		Contributor Employer*		Contributor Occupation*				Real Estate/architect	
Contributor Address/ PO Box*		Contributor Apartment or Suite Number																							
1310 S 1st Street																									
Contributor City*	Contributor State*	Contributor Zip Code*																							
Austin	TX	78704																							
Contributor Employer*		Contributor Occupation*																							
		Real Estate/architect																							
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	<table><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td>20181016</td><td>\$2,105.58</td></tr></table>	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*	20181016	\$2,105.58																				
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<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* <div>C3 Presents</div>		
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	Contributor Address/ PO Box* <div>1645 East</div> Contributor City* <div>Austin</div> Contributor Employer* <div></div>	Contributor Apartment or Suite Number <div>Suite 150</div> Contributor State* <div>TX</div>	Contributor Zip Code* <div>78702</div> Contributor Occupation* <div></div>
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	Contribution Date (yyyymmdd)* <div>20181016</div> (\$ ) Contribution Amount* <div>\$5,263.47</div>		



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<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* GB/AEI Infrastructure	
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	Contributor Address/ PO Box* 2405 Pruett Street  Contributor City* Austin  Contributor Employer* 	Contributor Apartment or Suite Number  Contributor State* TX Contributor Zip Code* 78703  Contributor Occupation* 
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	Contribution Date (yyyymmdd)* 20181016	(\$) Contribution Amount* \$5,263.47



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<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input type="checkbox"/> Contributor is an individual	<b>Organization Name or Contributor Last Name, as applicable*</b> <div>MDW Interests, Ltd</div>	
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	<b>Contributor Address/ PO Box*</b> <div>PO Box 5623</div> <b>Contributor City*</b> <div>Austin</div> <b>Contributor Employer*</b> <div></div>	<b>Contributor Apartment or Suite Number</b> <div></div> <b>Contributor State*</b> <div>TX</div> <b>Contributor Zip Code*</b> <div>78763</div> <b>Contributor Occupation*</b> <div></div>
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	<b>Contribution Date (yyyymmdd)*</b> <div>20181017</div>	<b>(\$) Contribution Amount*</b> <div>\$2,000.00</div>



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<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input checked="" type="checkbox"/> Contributor is an individual	<table><tr><td>Contributor Title</td><td>Contributor First Name*</td></tr><tr><td></td><td>Anthony</td></tr><tr><td colspan="2">Organization Name or Contributor Last Name, as applicable*</td></tr><tr><td colspan="2">Precourt</td></tr><tr><td colspan="2">Contributor Suffix</td></tr><tr><td colspan="2"></td></tr></table>	Contributor Title	Contributor First Name*		Anthony	Organization Name or Contributor Last Name, as applicable*		Precourt		Contributor Suffix															
Contributor Title	Contributor First Name*																								
	Anthony																								
Organization Name or Contributor Last Name, as applicable*																									
Precourt																									
Contributor Suffix																									
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	<table><tr><td colspan="2">Contributor Address/ PO Box*</td><td colspan="2">Contributor Apartment or Suite Number</td></tr><tr><td colspan="2">869 Culebra Rd.</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>Hillsborough</td><td>CA</td><td colspan="2">94010</td></tr><tr><td colspan="2">Contributor Employer*</td><td colspan="2">Contributor Occupation*</td></tr><tr><td colspan="2"></td><td colspan="2">Investor</td></tr></table>	Contributor Address/ PO Box*		Contributor Apartment or Suite Number		869 Culebra Rd.				Contributor City*	Contributor State*	Contributor Zip Code*		Hillsborough	CA	94010		Contributor Employer*		Contributor Occupation*				Investor	
Contributor Address/ PO Box*		Contributor Apartment or Suite Number																							
869 Culebra Rd.																									
Contributor City*	Contributor State*	Contributor Zip Code*																							
Hillsborough	CA	94010																							
Contributor Employer*		Contributor Occupation*																							
		Investor																							
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	<table><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td>20181017</td><td>\$1,500.00</td></tr></table>	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*	20181017	\$1,500.00																				
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<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* <div>Colina West</div>		
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	Contributor Address/ PO Box* <div>2603 Buckminster Ct</div>	Contributor Apartment or Suite Number <div></div>	
	Contributor City* <div>Austin</div>	Contributor State* <div>TX</div>	Contributor Zip Code* <div>78746</div>
	Contributor Employer* <div></div>	Contributor Occupation* <div></div>	
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	Contribution Date (yyyymmdd)* <div>20181019</div>		(\$) Contribution Amount* <div>\$526.63</div>



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Contributor Title	Contributor First Name*																		
	Adam																		
Organization Name or Contributor Last Name, as applicable*	Contributor Suffix																		
Nims																			
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	<table><tr><td>Contributor Address/ PO Box*</td><td colspan="2">Contributor Apartment or Suite Number</td></tr><tr><td>5101 Cuesta Verde</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>78746</td></tr><tr><td>Contributor Employer*</td><td colspan="2">Contributor Occupation*</td></tr><tr><td></td><td colspan="2">Real Estate</td></tr></table>	Contributor Address/ PO Box*	Contributor Apartment or Suite Number		5101 Cuesta Verde			Contributor City*	Contributor State*	Contributor Zip Code*	Austin	TX	78746	Contributor Employer*	Contributor Occupation*			Real Estate	
Contributor Address/ PO Box*	Contributor Apartment or Suite Number																		
5101 Cuesta Verde																			
Contributor City*	Contributor State*	Contributor Zip Code*																	
Austin	TX	78746																	
Contributor Employer*	Contributor Occupation*																		
	Real Estate																		
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	<table><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td>20181019</td><td>\$1,052.95</td></tr></table>	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*	20181019	\$1,052.95														
Contribution Date (yyyymmdd)*	(\$) Contribution Amount*																		
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<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* <div>Pearlstone Partners</div>		
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	Contributor Address/ PO Box* <div>1615 East 7th Street</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>78702</div> Contributor Occupation* <div></div>
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	Contribution Date (yyyymmdd)* <div>20181020</div> (\$) Contribution Amount* <div>\$21,052.95</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.

<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* Cielo Property Group		
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	Contributor Address/ PO Box* 823 Congress Avenue	Contributor Apartment or Suite Number Ste 600	
	Contributor City* Austin	Contributor State* TX	Contributor Zip Code* 78701
	Contributor Employer* 	Contributor Occupation* 	
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	Contribution Date (yyyymmdd)* 20181022	(\$) 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.

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.

<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input type="checkbox"/> Contributor is an individual	<b>Organization Name or Contributor Last Name, as applicable*</b> <div>Kirk Watson Campaign</div>		
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	<b>Contributor Address/ PO Box*</b> <div>P.O. Box 2004</div> <b>Contributor City*</b> <div>Austin</div> <b>Contributor Employer*</b> <div></div>	<b>Contributor Apartment or Suite Number</b> <div></div> <b>Contributor State*</b> <div>TX</div> <b>Contributor Occupation*</b> <div></div>	<b>Contributor Zip Code*</b> <div>78768</div>
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	<b>Contribution Date (yyyymmdd)*</b> <div>20181019</div> <b>(\$) Contribution Amount*</b> <div>\$500.00</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.

<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input type="checkbox"/> Contributor is an individual	<b>Organization Name or Contributor Last Name, as applicable*</b> Neutron Holdings		
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	<b>Contributor Address/ PO Box*</b> 2121 S El Camino Real	<b>Contributor Apartment or Suite Number</b> 	<b>Contributor City*</b> San Mateo
	<b>Contributor State*</b> CA	<b>Contributor Zip Code*</b> 94403	<b>Contributor Employer*</b> 
	<b>Contributor Occupation*</b> 		
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	<b>Contribution Date (yyyymmdd)*</b> 20181018	<b>(\$) Contribution Amount*</b> \$7,500.00	



# 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.

<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* <div>Airport Concessions &amp; In-Flight Local 23</div>		
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	Contributor Address/ PO Box* <div>275 Seventh Ave</div> Contributor City* <div>New York</div> Contributor Employer* <div></div>	Contributor Apartment or Suite Number <div>16th Floor</div> Contributor State* <div>NY</div> Contributor Zip Code* <div>10001</div> Contributor Occupation* <div></div>	
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	Contribution Date (yyyymmdd)* <div>20191022</div> (\$ ) Contribution Amount* <div>\$2,500.00</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.

<b>1</b>  <b>CONTRIBUTOR NAME</b>  <input type="checkbox"/> Contributor is an individual	Organization Name or Contributor Last Name, as applicable* Centaurus Investments		
<b>2</b>  <b>CONTRIBUTOR ADDRESS AND EMPLOYER</b>	Contributor Address/ PO Box* 3100 Mckinnon Street	Contributor Apartment or Suite Number Suite 250	
	Contributor City* Dallas	Contributor State* TX	Contributor Zip Code* 75201
	Contributor Employer* 	Contributor Occupation* 	
<b>3</b>  <b>CONTRIBUTION DETAILS</b>	Contribution Date (yyyymmdd)* 20181019		(\$) Contribution Amount* \$15,000.00

Add Another Contribution Page