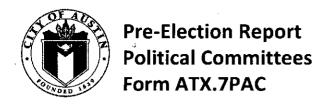


OCC RECEIVED AT NOV 2'18 PM3:25

Use this form to report contributions received and expenditures made between the 9th day before the Election and the day before the Election that have met the monetary thresholds identified in City Code 2-2-29. For detailed instructions on how to complete this form, see the **Pre-Election Report: Political Committees Instruction Guide**

1	Committee Name*								
COMMITTEE NAME	Travis County Democrat	avis County Democratic Party							
2	Address/ PO Box			Apartment or Suite Number					
COMMITTEE	PO Box 684263								
ADDRESS	City			State	Zip Code				
	Austin			ТХ	78768				
3	Title First N	ame			Middle Initial				
COMMITTEE TREASURER	Hon Dyana		(
NAME	Nickname	Last Name			Suffix				
		Limon-Me	rcado						
4	Address/ PO Box			Apartment or	Suite Number				
COMMITTEE TREASURER	PO Box 684263								
ADDRESS	City			State	Zip Code				
AUSTRESS	Austin			TX .	78768				
5	Start Date (yyyymmdd)*		,	End Date	(yyyymmdd)*				
REPORTING PERIOD	20181026		THROUGH	2018112	_				

^{*} Indicates a required field



6		
SCHEDULES	\boxtimes	Schedule ATX.7A - Pre-Election Report of Contributions
ATTACHED		
Check box for each form	\boxtimes	Schedule ATX.7F - Pre-Election Report of Expenditures
attached		

AFFIDAVIT

By signature below, I certify that the Pre-Election Report 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 2-2-29 for the reporting period indicated.

Signature of Affiant



Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

1	T		
CONTRIBUTOR			
NAME			
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*		
	Chari Kelly Campaign		
CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* PO Box 161151 Contributor City* Austin	Contributor Apartme Contributor State*	Contributor Zip Code*
	Per City Code 2-2-29(d), employer and occupation are required for	Contributor Occupat	
CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20181029 In-Kind Contribution Description, if applicable	(\$) Contribution Am \$5,000.00	ount*

Add Another Contribution Page



Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

1 CONTRIBUTOR	·		
CONTRIBUTOR	·		
NAME			
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*	•	
	Yes on Prop E	•	
2	Contributor Address/ PO Box*	Contributor Apartme	ent or Suite Number
CONTRIBUTOR	PO Box 301074	· ·	
ADDRESS	Contributor City*	Contributor State*	Contributor Zip Code*
AND EMPLOYER	Austin	ΤX	78703
ENIPLOTER	Contributor Employer	Contributor Occupat	ian
	Per City Code 2-2-29(d), employer and occupation are required for	or individuals whose co	ntribution is \$200 or more
3	Contribution Date (yyyymmdd)*	(\$) Contribution Am	ount*
CONTRIBUTION	20181030	\$1,500.00	
DETAILS	In-Kind Contribution Description, if applicable		
	Table Tabl		

Add Another Contribution Page



Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

CONTRIBUTOR NAME Contributor is an individual	Contributor Title Contributor First Name* Amy Organization Name or Contributor Last Name, as applicable* Mol	Contributor Suffix
CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* 6301 Cat Mt Cv Contributor City* Austin Contributor Employer AACC Per City Code 2-2-29(d), employer and occupation are required f	Contributor Apartment or Suite Number Contributor State* Contributor Zip Code* TX 78731 Contributor Occupation President and CEO or individuals whose contribution is \$200 or more
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd) * 20181030 In-Kind Contribution Description, if applicable	(\$) Contribution Amount* \$500.00

Add/Another Contails rillon Rage



Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

1 CONTRIBUTOR NAME			j
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*		
•	Chari Kelly Campaign .		
2 CONTRIBUTOR	Contributor Address/ PO Box* PO Box 161151	Contributor Apartme	ent or Suite Number
ADDRESS	Contributor City*	Contributor State*	Contributor Zip Code*
AND	Austin	тх	78716
EMPLOYER	Contributor Employer	Contributor Occupat	tion
	Per City Code 2-2-29(d), employer and occupation are required f	or individuals whose co	entribution is \$200 or more
3	Contribution Date (yyyymmdd)*	(\$) Contribution Am	nount*
CONTRIBUTION	20181031	\$5,000.00	
· DETAILS	In-Kind Contribution Description, if applicable		

Add Another Contribution Page



Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

1				
PAYEE	,		•	
NAME	Organization Name or Payee Last Name, as applicable*			
Payee is an individual	Hustle Inc			
2	Payee Address/ PO Box*	Payee Apartment	or Suite Number	
PAYEE	343 Sansome			
ADDRESS	Payee City*	Payee State*	Payee Zip Code*	
	San Francisco	CA	94104	
3	Category*	(\$) Expenditure A	imount*	
EXPENDITURE	Advertising Expense	\$3,124.16		
DETAILS	Description (If Category is "Other")	Expenditure Date	*	
		20181031		

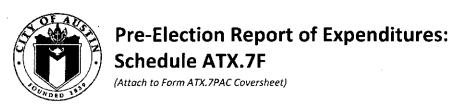


Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

*	Indicates	а	reaui	red	field

	Payee Title Payee First Name*	
PAYEE	Brittany	
NAME	Organization Name or Payee Last Name, as applicable*	Payee Suffix
Payee is an individual	Houle	·
2	Payee Address/ PO Box*	Payee Apartment or Suite Number
PAYEE	9801 Parmer	2226
ADDRESS	Payee City*	Payee State* Payee Zip Code*
	Austin	TX 78717
3	Category*	(\$) Expenditure Amount*
EXPENDITURE	Salaries/Wages/Contract labor	\$327.11
DETAILS	Description (If Category is "Other")	Expenditure Date*
		20181031



Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

PAYEE NAME Name	Payee Title Payee First Name* Jerry Organization Name or Payee Last Name, as applicable* Rutherford	Payee Suffix
PAYEE ADDRESS	Payee Address/ PO Box* 7107 Guadalupe Payee City* Austin	Payee Apartment or Suite Number Payee State* Payee Zip Code* TX 78752
3 EXPENDITURE DETAILS	Category* Salaries/Wages/Contract labor Description (If Category is "Other")	(\$) Expenditure.Amount* \$259.73 Expenditure Date* 20181031



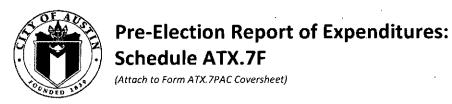
Expenditure

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form ATX.1: Report of Direct **Campaign Expenditures**

* Indicates a required field

1 PAYEE	Payee Title Payee First Name*		
NAME Payee is an individual	Organization Name or Payee Last Name, as applicable*	Payee Suffix	
2	Payee Address/ PO Box*	Payee Apartment o	r Suite Number
PAYEE	2216 Haskel		
ADDRESS	Payee City*	Payee State*	Payee Zip Code*
	Austin	тх	78702
3	Category*	(\$) Expenditure Am	ount*
EXPENDITURE	Salaries/Wages/Contract labor	\$617.91	
DETAILS	Description (If Category is "Other")	Expenditure Date*	



Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

*	ind	icates	а	rea	uire	d fie	ld
		100103	u	4	uii c	u nc	ı

1	Payee Title Payee First Name*		
PAYEE	Jason		
NAME	Organization Name or Payee Last Name, as applicable*	Payee Suffix	
Payee is an individual	Skinmoore		
2	Payee Address/ PO Box*	Payee Apartment or Suite Number	
PAYEE	505 Shaver Dr	203	
ADDRESS	Payee City*	Payee State * Payee Zip Code *	
	Austin	TX 78752	
3	Category*	(\$) Expenditure Amount*	
EXPENDITURE	Salaries/Wages/Contract labor	\$138.52	
DETAILS	Description (If Category is "Other")	Expenditure Date*	
		20181031	



Expenditure

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form ATX.1: Report of Direct **Campaign Expenditures**

* Indicates a required field

1 PAYEE NAME	Payee Title Payee First Name* Hailey	
TANKE	Organization Name or Payee Last Name, as applicable*	Payee Suffix
Payee is an individual	Williams	
2	Payee Address/ PO Box*	Payee Apartment or Suite Number
PAYEE	1331 Candleshade	
ADDRESS	Payee City*	Payee State* Payee Zip Code*
	Hoston	TX - 77045
3	Category*	(\$) Expenditure Amount*
EXPENDITURE	Salaries/Wages/Contract labor	
DETAILS	Description (If Category is "Other")	Expenditure Date*
		20181031



Expenditure

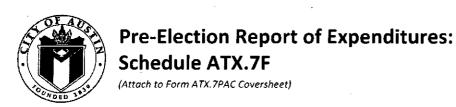
Itemize each expenditure in Sections 1-3.
For additional expenditures, click "Add Another Expenditure Page" below.

(Attach to Form ATX.7PAC Coversheet)

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

1 PAYEE	Payee Title Payee First Name*		
NAME	Organization Name or Payee Last Name, as applicable*	Payee Suffix	
Payee is an individual	Wrzesinski		
2	Payee Address/ PO Box*	Payee Apartme	nt or Suite Number
PAYEE	8600 Thunderbird Cv		:
ADDRESS	Payee City*	Payee State*	Payee Zip Code*
	Austin	тх	78721
3	Category*	(\$) Expenditure	· Amount*
EXPENDITURE	Salaries/Wages/Contract labor	\$224.26 Expenditure Date*	
DETAILS	Description (If Category is "Other")		
		20181031	



Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

1	•		· -
	Payee Title Payee First Name*		
PAYEE	Chris		
NAME	Organization Name or Payee Last Name, as applic	able* Payee Suffix	
Payee is an individual	Cauthen		
2	Payee Address/ PO Box*	Payee Apartment o	or Suite Number
PAYEE	219 E Mistletoe	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	
ADDRESS	Payee City*	Payee State*	Payee Zip Code*
	San Antonio	тх	78623 :
3	Category*	(\$) Expenditure An	nount*
EXPENDITURE	Salaries/Wages/Contract labor	\$234.64	
DETAILS	Description (If Category is "Other")	Expenditure Date*	
		20181031	
			,



Expenditure

Itemize each expenditure in Sections 1-3.

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

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form ATX.1: Report of Direct **Campaign Expenditures**

* Indicates a required field

1		Payee Title	Payee First Name*		
	PAYEE		Gamuchirayi		
	NAME	Organization N	ame or Payee Last Name, as applicable*	Payee Suffix	
	Payee is an individual	Marikano	,	-	
2	·	Payee Address,	/ PO Box*	Payee Apartment	or Suite Number
	PAYEE	439 Woodward			
	ADDRESS	Payee City*		Payee State*	Payee Zip Code*
		Austin		тх	78704
3		Category*	•	(\$) Expenditure A	
	EXPENDITURE	Salaries/Wages	/Contract labor	\$155.35	
•	DETAILS	Description (If	Category is "Other")	Expenditure Date ³	*
				20181031	
I		1			



Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

PAYEE	Payee Title Payee First Name*		
NAME	Organization Name or Payee Last Name, as applicable*	Payee Suffix	
Payee is an individual	Mein		
2	Payee Address/ PO Box*	Payee Apartment	or Suite Number
PAYEE	7000 Priscilla Dr		
ADDRESS	Payee City*	Payee State*	Payee Zip Code*
	Austin	тх	78752
3	Category*	(\$) Expenditure A	mount*
EXPENDITURE	Salaries/Wages/Contract labor	\$402.74	
DETAILS	Description (If Category is "Other")	Expenditure Date	*
		20181031	



Expenditure

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form ATX.1: Report of Direct **Campaign Expenditures**

*	Indicates	а	rea	uire	d fie	eld
	111010000	·		~	~ • • • •	- 1 -

1 PAYEE	Payee Title Payee First Name*	
,,,,,	Krista	
NAME ·	Organization Name or Payee Last Name, as applicable	Payee Suffix
Payee is an individual	Ziehler	
2	Payee Address/ PO Box*	Payee Apartment or Suite Number
PAYEE	5506 Grover	
ADDRES\$	Payee City*	Payee State * Payee Zip Code *
	Austin	TX 78752
3	Category*	(\$) Expenditure Amount*
EXPENDITURE	Salaries/Wages/Contract labor	\$87.42
DETAILS	Description (If Category is "Other")	Expenditure Date*
		20181031
İ		

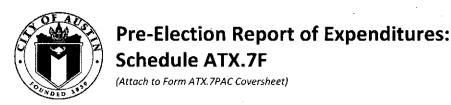


Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

1	Payee Title Payee First Name*	
PAYEE	James	
NAME	Organization Name or Payee Last Name, as applicable*	Payee Suffix
Payee is an individual	Ragland	
2	Payee Address/ PO Box*	Payee Apartment or Suite Number
PAYEE	1810 Fast Filly	
ADDRESS	Payee City*	Payee State* Payee Zip Code*
	Pflugerville	TX 78660
3	Category*	(\$) Expenditure Amount*
EXPENDITURE		\$256.26
DETAILS	Description (If Category is "Other")	Expenditure Date*
		20181031



(\$) Expenditure Amount*

Expenditure Date*

\$83.11

20181031

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Category*

Salaries/Wages/Contract labor

Description (If Category is "Other")

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required fiel	d	
PAYEE NAME Payee is an individual	Payee Title Payee First Name* Matthew Organization Name or Payee Last Name, as applicable* Smith	Payee Suffix
2	Payee Address/ PO Box*	Payee Apartment or Suite Number
PAYEE	9801 W Parmer	1314
ADDRESS	Payee City*	Payee State* Payee Zip Code*
	AUstin	78717

Add Another Expenditure Page

EXPENDITURE

DETAILS



Expenditure

Itemize each expenditure in Sections 1-3.
For additional expenditures, click "Add Another Expenditure Page" below.

(Attach to Form ATX.7PAC Coversheet)

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1**: **Report of Direct Campaign Expenditures**

* Indicates a required field

1	PAYEE	Payee Title Payee First Name*		
	NAME	Organization Name or Payee Last Name, as applicable*	Payee Suffix	
	Payee is an individual	Morris		
2	PAYEE	Payee Address/ PO Box*	Payee Apartment	or Suite Number
		3007 Speedway		
	ADDRESS	Payee City*	Payee State*	Payee Zip Code*
		Austin	ТХ	78703
3		Category*	(\$) Expenditure A	\mount*
	EXPENDITURE	Salaries/Wages/Contract labor	\$180.05	
	DETAILS	Description (If Category is "Other")	Expenditure Date	*
ē			20181031	



Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

1 PAYEE	Payee Title Payee First Name*			
NAME	Organization Name or Payee Last Name, as applicable *			
Payee is an individual	Heard			
2.	Payee Address/ PO Box*	Payee Apartmer	nt or Suite Number	
PAYEE	9220 IH 35	232	232	
ADDRESS	Payee City*	Payee State*	Payee Zip Code*	
	Austin	Тх	78753	
3	Category*	(\$) Expenditure	Amount*	
EXPENDITURE	Salaries/Wages/Contract labor	\$55.41		
DETAILS	Description (If Category is "Other")	Expenditure Dat	e*	
	, , , , , , , , , , , , , , , , , , , ,	20181031		



Expenditure

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form ATX.1: Report of Direct **Campaign Expenditures**

* Indicates a required field

1 PAYEE	Payee Title Payee First Name*	
NAME	Organization Name or Payee Last Name, as applicable*	Payee Suffix
Payee is an individual	Wuersig .	
2	Payee Address/ PO Box*	Payee Apartment or Suite Number
PAYEE	2910 Gault St	210
ADDRESS	Payee City*	Payee State* Payee Zip Code*
	Austin	TX 78757
3	Category*	(\$) Expenditure Amount*
EXPENDITURE	Salaries/Wages/Contract labor	\$276.30
DETAILS	Description (If Category is "Other")	Expenditure Date*
		20181031



Expenditure

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form ATX.1: Report of Direct **Campaign Expenditures**

* Indicates a required field

1	Payee Title Payee First Name*		
PAYEE	Oscar		
NAME	Organization Name or Payee Last Name, as applicable*	Payee Suffix	
Payee is an individual	Ibarra		
2	Payee Address/ PO Box*	Payee Apartment	or Suite Number
PAYEE	309 E 11th St		
ADDRESS	Payee City*	Payee State*	Payee Zìp Code*
	Austin	тх	78701
3	Category*	(\$) Expenditure A	mount*
EXPENDITURE	·	\$159.30	
DETAILS	Description (If Category is "Other")	Expenditure Date ³	k
		20181031	



Expenditure

(Attach to Form ATX.7PAC Coversheet)

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

1	Payee Title Payee First Name*	
PAYEE	Monica	
NAME	Organization Name or Payee Last Name, as applicable*	Payee Suffix .
🔀 Paγee is an individual	Cosgrove	
2	Payee Address/ PO Box*	Payee Apartment or Suite Number
PAYEE	9200 Sedgemoor Tr	
ADDRESS	Payee City*	Payee State* Payee Zip Code*
	Austin	TX 78748
3	Category*	(\$) Expenditure Amount*
EXPENDITURE	Salaries/Wages/Contract labor	\$187.01
DETAILS	Description (If Category is "Other")	Expenditure Date*
,		20181031