

OCC RECEIVED AT NOV 5'18 PM1:06

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**

Committee Name	*				·		·
Vote Yes on Prop I	/ote Yes on Prop K						
Address/ PO Box				Apa	rtment or S	uite Number	
806 Jewell St							
City				Stat	e	Zip Code	
Austin				ТХ		78704	
				_		Middle Initial	
Nickname		Last Name Searle					Suffix
Address/ PO Box				Apa	rtment or S	iuite Number	
806 Jewell St							
City				Stat	e	Zip Code	
Austin		· · · · · · · · · · · · · · · · · · ·		ТХ		78704	
Start Date (yyyymmdd)*		End Date (yyyymmdd)*					
20181102			THROUGH		20181104		-
	Address/ PO Box 806 Jewell St City Austin Title Nickname Address/ PO Box 806 Jewell St City Austin Start Date (yyyymi	806 Jewell St City Austin Title First Name Michael Nickname Address/ PO Box 806 Jewell St City Austin Start Date (yyyymmdd)*	Vote Yes on Prop K Address/ PO Box 806 Jewell St City Austin Title First Name Michael Nickname Last Name Searle Address/ PO Box 806 Jewell St City Austin	Vote Yes on Prop K Address/ PO Box 806 Jewell St City Austin Title First Name Michael Nickname Last Name Searle Address/ PO Box 806 Jewell St City Austin Start Date (yyyymmdd)*	Vote Yes on Prop K Address/ PO Box Apa 806 Jewell St City Stat Austin TX Title First Name Michael Nickname Last Name Searle Address/ PO Box Apa 806 Jewell St City Stat Austin TX	Vote Yes on Prop K Address/ PO Box Apartment or S 806 Jewell St City State Austin TX Title First Name Michael Nickname Last Name Searle Address/ PO Box Apartment or S 806 Jewell St City State Austin TX	Address/ PO Box Apartment or Suite Number 806 Jewell St City State TX Title First Name Middle Initial Michael Nickname Last Name Searle Address/ PO Box Apartment or Suite Number Searle Address/ PO Box Apartment or Suite Number State TX TX TX TX TX TX TX TX TX T

^{*} Indicates a required field

6	
SCHEDULES	Schedule ATX.7A - Pre-Election Report of Contributions
ATTACHED	
Check box for each form	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 CONTRIBUTOR NAME	Contributor Title Contributor First Name*			
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*	Contributor Suffix		
	Chhin			
2	Contributor Address/ PO Box*	Contributor Apartment or Suite Number		
CONTRIBUTOR	10910 Mickelson Dr			
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*		
AND	Austin	TX 78747		
EMPLOYER	Contributor Employer	Contributor Occupation		
	Texas Catholic Conference of Bishops	Public Policy Outreach Coordinator		
	Per City Code 2-2-29(d), employer and occupation are required	for individuals whose contribution is \$200 or more		
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*		
CONTRIBUTION	20181102	\$50.00		
DETAILS	In-Kind Contribution Description, if applicable			



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* Vaughn Organization Name or Contributor Last Name, as applicable* Brock	Contributor Suffix
CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* PO Box 160340 Contributor City* Austin Contributor Employer Veritas Family Partners Per City Code 2-2-29(d), employer and occupation are required for	Contributor Apartment or Suite Number Contributor State* Contributor Zip Code* TX 78704 Contributor Occupation Investment Committee or individuals whose contribution is \$200 or more
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20181102 In-Kind Contribution Description, if applicable	(\$) Contribution Amount* \$500.00



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* Michael Organization Name or Contributor Last Name, as applicable* Searle	Contributor Suffix	
2	Contributor Address/ PO Box*	Contributor Apartment or Suite Number	
CONTRIBUTOR	806 Jeweli St		
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*	
AND	Austin	TX 78704	
EMPLOYER	Contributor Employer	Contributor Occupation	
	Non Profit	Executive Director	
	Per City Code 2-2-29(d), employer and occupation are required	for individuals whose contribution is \$200 or more	
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*	
CONTRIBUTION 20181102		\$1,000.00	
DETAILS	In-Kind Contribution Description, if applicable		



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 Title Contributor First Name*		
CONTRIBUTOR	Stuart		
NAME			
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*	Contributor Suffix	
	Shaw		
2	Contributor Address/ PO Box*	Contributor Apartment or Suite Number	
CONTRIBUTOR	6009 Eleos Circle		
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*	
AND	Austin	TX 78735	
EMPLOYER	Contributor Employer	Contributor Occupation	
	BC	CEO	
	Per City Code 2-2-29(d), employer and occupation are required f	for individuals whose contribution is \$200 or more	
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*	
CONTRIBUTION	20181102	\$3,000.00	
DETAILS	In-Kind Contribution Description, if applicable		



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* Jay Organization Name or Contributor Last Name, as as	policable* Contributor Suffix
2	Novik Novik	estimater same
	Contributor Address/ PO Box*	Contributor Apartment or Suite Number
CONTRIBUTOR	515 Congress Ave	2220
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*
AND	Austin	TX 78701
EMPLOYER	Contributor Employer	Contributor Occupation
	Black Diamond Capital	Investor
	Per City Code 2-2-29(d), employer and occupation a	are required for individuals whose contribution is \$200 or more
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*
CONTRIBUTION	20181102	\$2,000.00
DETAILS	In-Kind Contribution Description, if applicable	



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* Paul Organization Name or Contributor Last Name, as applicable*	Contributor Suffix
	Matthews	
CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* 8908 Splitarrow Drive Contributor City* Austin Contributor Employer Travis County Per City Code 2-2-29(d), employer and occupation are required	Contributor Apartment or Suite Number Contributor State* Contributor Zip Code* TX 78717 Contributor Occupation Finance Director/CPA for individuals whose contribution is \$200 or more
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20181102	(\$) Contribution Amount* \$50.00
VEIGILA	In-Kind Contribution Description, if applicable	



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 Title	Contributor First Name*			
NAME	Mewes				
Contributor is an individual	Organization Nam	e or Contributor Last Name, as applicable*	Contributor Suffix		
	Goetzmann				
CONTRIBUTOR	Contributor Addre	· · · · · · · · · · · · · · · · · · ·	Contributor Apartment or Suite Number		
ADDRESS Contributor City*			Contributor State*	Contributor Zip Code*	
AND	Austin		тх	78746	
EMPLOYER	Contributor Employer		Contributor Occupation		
	Retired		Retired	Retired	
	Per City Code 2-2-2	29(d), employer and occupation are required	d for individuals whose co	ontribution is \$200 or more	
3	Contribution Date	(yyyymmdd)*	(\$) Contribution Amount*		
CONTRIBUTION	20181102		\$50.00		
DETAILS	In-Kind Contribution	on Description, if applicable			



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 Title Contributor First Name*			
NAME				
Contributor is an individual	Organization Name or Contributor Last Name, as applicable *	Contributor Suffix		
	Committee to Elect Jason Isaac			
2	Contributor Address/ PO Box*	Contributor Apartme	ent or Suite Number	
CONTRIBUTOR	100 Commons Road	7-125		
ADDRESS	Contributor City *	Contributor State*	Contributor Zip Code*	
AND	Dripping Springs	тх	78620	
EMPLOYER	Contributor Employer	Contributor Occupation		
	CTEJI SPAC SPAC, CANDIDATE			
	Per City Code 2-2-29(d), employer and occupation are required	for individuals whose co	ontribution is \$200 or more	
3	Contribution Date (yyyymmdd)*	(\$) Contribution Am	nount*	
CONTRIBUTION	CONTRIBUTION 20181103			
DETAILS	In-Kind Contribution Description, if applicable			



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**

idicates a required fiel	d			
PAYEE				
NAME	Organization Name or Payee Last Name, as applicable *			
Payee is an individual	Vici Media			
	Payee Address/ PO Box*	Payee Apartment	or Suite Number	
PAYEE	816 Big Woods Dr			
ADDRESS	Payee City*	Payee State*	Payee Zip Code*	
	Longview	тх	75605	
	Category*	(\$) Expenditure A	Amount*	
EXPENDITURE	Advertising Expense	\$12,704.00		
DETAILS	Description (If Category is "Other")	Expenditure Date	*	
		20181102		

Add/Another/Expenditure Page



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	Organization Name or Payee Last Name, as applicable*		·
	Payee is an individual	Colton Bostick		
2		Payee Address/ PO Box*	Payee Apartment	or Suite Number
	PAYEE	306 Gulfstream Dr		
	ADDRESS	Payee City*	Payee State*	Payee Zip Code*
		Georgetown	тх	78626
3		Category*	(\$) Expenditure A	mount*
	EXPENDITURE	Other (use Description field)	\$1,360.00 Expenditure Date*	
	DETAILS	Description (If Category is "Other")		
		Video Production	20181102	

Add Another Expenditure Page



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 fiel	d			
1		-		
PAYEE		•		
NAME	Organization Name or Payee Last Name, as applicable*			
Payee is an individual	Jacob Pennington			
2	Payee Address/ PO Box*	Payee Apartment	Payee Apartment or Suite Number	
PAYEE	7380 FM 3405			
ADDRESS	Payee City*	Payee State*	Payee Zip Code*	
	Liberty Hill	тх	78642	
3	Category*	(\$) Expenditure /	Amount*	
EXPENDITURÉ	Other (use Description field)	\$408.50		
DETAILS	Description (If Category is "Other")	Expenditure Date*		
,	Website	20181102	20181102	

Add Another Expenditure Page



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

PAYEE NAME Payee is an individual	Organization Name or Payee Last Name, as applicable* Owen Stroud		
PAYEE ADDRESS	Payee Address/ PO Box* 207 Lauderdale Rd Payee City* Nashville	Payee Apartment Payee State*	or Suite Number Payee Zip Code* 37205
3 EXPENDITURE DETAILS	Category* Other (use Description field) Description (If Category is "Other") Social Media	(\$) Expenditure Amount* \$288.00 Expenditure Date* 20181102	

Add Another-Expenditure Page



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				
NAME	Organization Name or Payee Last Name, as applicable*			
Payee is an individual	Donorbox			
2	Payee Address/ PO Box*	Payee Apartment	Payee Apartment or Suite Number	
PAYEE	1885 Mission St		,	
ADDRESS	Payee City*	Payee State*	Payee Zip Code*	
	San Francisco	CA	94103	
3	Category*	(\$) Expenditure A	Amount*	
EXPENDITURE	Other (use Description field)	\$328.90		
DETAILS	Description (If Category is "Other")	Expenditure Date*		
	Donation Software	20181102		

Add Another Expenditure Page