

Report of Direct Campaign Expenditures:ATX.1 COVERSHEET

1 INDIVIDUAL OR ORGANIZATION NAME	TITLE; FIRST; MI	PAGE # 15		
	LAST; SUFFIX Mobility for All	ACCOUNT # 00090488		
2 INDIVIDUAL OR ORGANIZATION ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3110 Manor Road, Suite H		Date Received ELECTRONICALLY FILED 10/16/2020	
	Austin, TX 78723		Receipt #	
	<input type="checkbox"/> (CHECK IF FILER'S HOME ADDRESS)		HD / PM	Amount
	3 INDIVIDUAL FILER EMPLOYER & OCCUPATION		Date Processed	
4 COMMITTEE TREASURER NAME	TITLE; FIRST; MI; LAST; SUFFIX		Date Imaged	
	Colette Pierce Burnette			
5 COMMITTEE TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 801 W 5th Street, Apt 1903 Austin, TX 78703			

Expenditure

FORM ATX1EXPEND

1 FILER NAME Mobility for All		2 FILER ID 00090488	3 Total pages Schedule ATX8EXPEND: Sch: 1/11 Rpt: 2/15
4 PAYEE NAME	LAST FIRST MI Y Strategy LLC		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 3110 Manor Road, Suite H Austin, TX 78723		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 10/14/2020	(d) Amount (\$) \$40,600.44	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Expenditure

FORM ATX1EXPEND

1 FILER NAME Mobility for All		2 FILER ID 00090488	3 Total pages Schedule ATX8EXPEND: Sch: 2/11 Rpt: 3/15
4 PAYEE NAME	LAST FIRST MI Y Strategy LLC		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 3110 Manor Road, Suite H Austin, TX 78723		
6 EXPENDITURE DETAILS	(a) Category Salaries/Wages/Contract Labor	(b) Description	
	(c) Date 10/14/2020	(d) Amount (\$) \$667.00	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Expenditure

FORM ATX1EXPEND

1 FILER NAME Mobility for All		2 FILER ID 00090488	3 Total pages Schedule ATX8EXPEND: Sch: 3/11 Rpt: 4/15
4 PAYEE NAME	LAST FIRST MI Y Strategy LLC		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 3110 Manor Road, Suite H Austin, TX 78723		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 10/14/2020	(d) Amount (\$) \$30,899.00	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Expenditure

FORM **ATX1EXPEND**

1 FILER NAME Mobility for All		2 FILER ID 00090488	3 Total pages Schedule ATX8EXPEND: Sch: 4/11 Rpt: 5/15
4 PAYEE NAME	LAST FIRST MI Y Strategy LLC		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 3110 Manor Road, Suite H Austin, TX 78723		
6 EXPENDITURE DETAILS	(a) Category Salaries/Wages/Contract Labor	(b) Description	
	(c) Date 10/14/2020	(d) Amount (\$) \$350.00	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Expenditure

FORM ATX1EXPEND

1 FILER NAME Mobility for All		2 FILER ID 00090488	3 Total pages Schedule ATX8EXPEND: Sch: 5/11 Rpt: 6/15
4 PAYEE NAME	LAST FIRST MI Y Strategy LLC		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 3110 Manor Road, Suite H Austin, TX 78723		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 10/14/2020	(d) Amount (\$) \$2,745.00	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Expenditure

FORM ATX1EXPEND

1 FILER NAME Mobility for All		2 FILER ID 00090488	3 Total pages Schedule ATX8EXPEND: Sch: 6/11 Rpt: 7/15
4 PAYEE NAME	LAST FIRST MI Y Strategy LLC		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 3110 Manor Road, Suite H Austin, TX 78723		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 10/14/2020	(d) Amount (\$) \$2,992.00	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Expenditure

FORM ATX1EXPEND

1 FILER NAME Mobility for All		2 FILER ID 00090488	3 Total pages Schedule ATX8EXPEND: Sch: 7/11 Rpt: 8/15
4 PAYEE NAME	LAST FIRST MI Austin Area Urban League		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 8011 Cameron Road Suite A-100 Austin, TX 78754		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 10/14/2020	(d) Amount (\$) \$8,000.00	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Expenditure

FORM ATX1EXPEND

1 FILER NAME Mobility for All		2 FILER ID 00090488	3 Total pages Schedule ATX8EXPEND: Sch: 8/11 Rpt: 9/15
4 PAYEE NAME	LAST FIRST MI DSPolitical LLC		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 1250 H Street NW Suite 200 Washington, DC 20005		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 10/14/2020	(d) Amount (\$) \$50,000.00	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Expenditure

FORM ATX1EXPEND

1 FILER NAME Mobility for All		2 FILER ID 00090488	3 Total pages Schedule ATX8EXPEND: Sch: 9/11 Rpt: 10/15
4 PAYEE NAME	LAST FIRST MI Y Strategy LLC		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 3110 Manor Road, Suite H Austin, TX 78723		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 10/15/2020	(d) Amount (\$) \$43,460.00	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Expenditure

FORM **ATX1EXPEND**

1 FILER NAME Mobility for All		2 FILER ID 00090488	3 Total pages Schedule ATX8EXPEND: Sch: 10/11 Rpt: 11/15
4 PAYEE NAME	LAST FIRST MI Y Strategy LLC		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 3110 Manor Road, Suite H Austin, TX 78723		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 10/15/2020	(d) Amount (\$) \$29,406.25	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Expenditure

FORM ATX1EXPEND

1 FILER NAME Mobility for All		2 FILER ID 00090488	3 Total pages Schedule ATX8EXPEND: Sch: 11/11 Rpt: 12/15
4 PAYEE NAME	LAST FIRST MI CheckMark Typesetting		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 3217 N IH 35 Austin, TX 78722		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 10/15/2020	(d) Amount (\$) \$1,860.23	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Contribution

FORM **ATX1CONTRIB**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule ATX1: Sch: 1/2 Rpt: 13/15
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/14/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benchmark Land Development, Inc. <hr/> 6 Contributor address; City; State; Zip Code 610 W 5th Street Suite 601 Austin, TX 78701	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laborers' Local 1095 <hr/> Contributor address; City; State; Zip Code 5555 N Lamar Blvd Suite E121 Austin, TX 78751	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MH HCAustin, LLC <hr/> Contributor address; City; State; Zip Code 2725 Rocky Mountain Avenue Suite 200 Loveland, CO 80538	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McWhinney Real Estate Services, Inc. <hr/> Contributor address; City; State; Zip Code 2725 Rocky Mountain Avenue Suite 200 Loveland, CO 80538	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redleaf Partners LLC <hr/> Contributor address; City; State; Zip Code 4015 Guadalupe St Austinn, TX 78751	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Contribution

FORM **ATX1CONTRIB**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule ATX1: Sch: 2/2 Rpt: 14/15
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/15/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Patrick <hr/> 6 Contributor address; City; State; Zip Code 730 Belvin St San Marcos, TX 78666	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Corridor Title Company
Date 10/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Studio 8 Architects Inc. <hr/> Contributor address; City; State; Zip Code 611 W 15th Street Austin, TX 78701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WSP USA Inc. <hr/> Contributor address; City; State; Zip Code One Penn Plaza New York City, NY 10119	Amount of Contribution (\$) \$25,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Report of Direct Campaign Expenditures:

ATX.1

AFFIDAVIT

This information serves as the electronic signature of the person legally responsible for filing this report.

I swear or affirm under 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 or affirm under penalty of perjury that this Report of Direct Campaign Expenditures 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.

Mobility for All

Signature of Filer