# CANDIDATE/OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH Cover Sheet PG 1 & 2

	The C/OH Instruction	n Guide explains how t	o complete this form.	1 ACCOUN (Ethics Commiss	N I # sion Filers)	2. Total page 353	es filed:
	CANDIDATE/ DFFICEHOLDER	MS/MRS/MR	FIRST Stephen		Mi		USE ONLY
1	NAME	NICKNAME	LAST Adler		SUFFIX	Date (Vecelved)	AUSTIN CITYECL RECEIVED
		ADDRESS /PO BOX:	APT/SUITE # CITY	STATE:	ZIP CODE	-1	
	CANDIDATE/	ADDRESS /FO BOX.	APT/SOILE# CITT	SIAIL.	ZIF CODE		ુ6 윤의
	OFFICEHOLDER ADDRESS	808 Nueces Street	Austin	TX	78701	Date Hand-delivered	or Balls Postmarked
	Change of Address						면 ER
5 (	CANDIDATE/	AREA CODE	PHONE NUMBER	EXTENSION	4	Receipt #	유
	OFFICEHOLDER PHONE	(512) 478					
6 (	CAMPAIGN	MS/MRS/MR	FIRST		MI	Date Processed	
-	TREASURER		Eugene				
1	NAME	AUCKALABAT	_		CLIECTY	Date Imaged	
		NICKNAME	LAST .		SUFFIX		
			Sepulveda				
7 (	CAMPAIGN	STREET ADDRESS:	APT/SUITE #	CITY	STATE:	ZIP CODE	
	TREASURER ADDRESS Residence or Business)	3114 Wheeler Street		Austin	ТX	78705	
<u> </u>	- <del></del>	AREA CODE	PHONE NUMBER	EXTENSION	N.		
	CAMPAIGN TREASURER	(512) 970		EXTENSIO	•		
	PHONE	(312) 370	J-9400				
	REPORT TYPE	☐ January 15 ☐ July 15	30th day before election	=	noff seeded \$500 fimit		after campaign tresurer ent (officeholder only) rt (Attach- COH-FR)
101	PERIOD	Month Day	Year		Month	Day Y	ear
	COVERED	07/01/2014	тн	ROUGH		09/25/2014	
11 8	ELECTION	ELECTION DATE Month Day 11/4/2014	Year Primar		Runoff	✓ General	Special Special
<u> </u>		OFFICE HELD (if any)	Other			•	
12 (	OFFICE	OFFICE HELD (IT any)		/ 13	Other Office		

P.O. Box 12070

Austin, Texas 78711-2070

(512) 463-5800

(TDD 1-800-325-8506)

14 C/OH NAME	Stephen Adler	ACCOUNT # (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MATTHE CANDIDATE / OFFICEHOLDER THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CONION CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ON EXPENDITURES.	DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE
additional pages		
17 CONTRIBUTION TOTALS	1 TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$0.00
	2 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$202,613.97
EXPENDITURE TOTALS	3 TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$0.00
	4 TOTAL POLITICAL EXPENDITURES	\$492,478.16
CONTRIBUTION BALANCE	5 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$101,408.83
OUTSTANDING LOAN TOTALS	6 TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$296,000.00
18 AFFIDAVIT	I swear, or affirm, under penalty of perjusit true and correct and includes all informe under Title 15, Election Code.	ury, that the accompanying report mation required to be reported by
AFFIX NOTARY S	STAMP / SEAL ABOVE Signature of Candida	ate or Officeholder
K	ribed before me, by the said	this the
day of	to certify which, witness my hand and seal of office.	
Signature of officer adi	MUSTERING OATH Printed name of officer administering oath Title of	officer administering oath



### SCHEDULE A

The I	nstruction Guide explains how to	complete	this form		Total pages Sche     209	
2. FILER NAME	Stephen Adler			-	3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tate PAC			8. In-kind contribution
09/25/2014	Betsy G Abell				contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$350.00	
	1 102 Enfield Rd Austin, TX 78703	<del>-4</del> 128				
					(if travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions	5)		'	oyer (See Instruction:	s)
President				В	uena Vista Foundation	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of contribution	In-kind contribution description (if applicable)
09/25/2014	Hughes Abell				\$350.00	description (ii applicable)
	6. Contributor address:	City	State	ZIP Code,	\$330.00	
	i 102 Enfield Rd Austin, TX 78703	-4128				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	3)		10 Empl	oyer (See Instruction	S)
General Partr	ner			L	lano Partners, Ltd.	
4. Date	5. Full name of contributor	Out-of-s	tate PAC _		7. Amount of	8. In-kind contribution
09/04/2014	Carol Adams		•		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	2905 Glenview Ave Austin, TX 78	703-1959				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occuj Non-Profit C	pation / Job title (See Instructionsonsultant	s)	-		oyer (See Instruction clf	s)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
08/13/2014	Joanne Adams	_	<del>"</del>	*	contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	·
	708 Split Rail Trl West Lake Hills,	TX 78746-	5481			
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)
					•	

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE A

				1	
The	Instruction Guide explains how to	o complete this forn	n	Total pages Schedule A:     209	
2. FILER NAME				3. ACCOUNT # (Et	hics Commission Filers)
	Stephen Adler				
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/13/2014	Luke Adams			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
5	708 Split Rail Trl Austin, TX 7874	6			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occi	upation / Job title (See Instruction	10 Empl	oyer (See Instruction	s)	
·		·			
4. Date	5. Full name of contributor	out-of-state PAC		7., Amount of	8. In-kind contribution
09/25/2014	Steven Adams			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	3101 Welton Cliff Dr Cedar Park,	TX 78613-4345			
,	)			(if travel outside o	Texas, complete Schedule T)
9. Principal occi	upation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	S)
<u>'</u>					
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Reid Adler			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$75.00	
	4716 Newcomb Pl Alexandria, VA	22304-1506			
		•		(if travel outside o	Texas, complete Schedule T)
9. Principal occi	upation / Job title (See Instruction	s)	10 Empi	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/09/2014	Jamil Alam			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	1401 Gaston Ave Austin, TX 7870	03-2513	,		
				(if travel outside o	Texas, complete Schedule T)
9. Principal occ	upation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)
Broker	/		E	Endeavor Real Estate	

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### SCHEDULE A

The I	nstruction Guide explains how to	complete this form	,	Total pages Sche     209	
2. FILER NAME	Stephen Adler	1		3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/09/2014	Paige G Alam			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	1401 Gaston Ave Austin, TX 7870	3-2513			
				(if travel outside o	Texas, complete Schedule T)
	pation / Job title (See Instructions	s)	,	oyer (See Instruction	s)
Author			G	raham Blanchard	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Fadya AlBakry			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	3300 Bee Caves Rd # 650-183 Wes	st Lake Hills, TX 7874	46-6600		,
				(if travel outside o	Texas, complete Schedule T)
<ol><li>Principal occuj</li></ol>	pation / Job title (See Instruction:	s)		oyer (See Instruction	s)
Therapist			F	adya Psychotherapy	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/29/2014	Eduardo Alcocer			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	5812 Standing Rock Dr Austin, TX	78730-2819			
				(if travel outside o	Texas, complete Schedule T)
Principal occup     Physician	pation / Job title (See Instruction	s)		oyer (See Instruction austin Gastroenterology	
4. Date	5. Full name of contributor	Out-of-state PAC	-	7. Amount of	8. In-kind contribution
09/24/2014	Katherine Alden			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$25.00	
-	4330 Bull Creek Rd Apt 3115 Aust	tin, TX 78731-5956			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)

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### SCHEDULE A

The	Instruction Guide explains how to com		Total pages Scho     209		
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/29/2014	Robert Alden			contribution	description (if applicable)
	6. Contributor address; Ci	ty State	ZIP Code	\$50.00	
	707 W 34th St Apt 3115 Austin, TX 7870	05-1204		1	·
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)	-	10 Emplo	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/24/2014	Robert Alden			contribution	description (if applicable)
	6. Contributor address: Ci	ty State	ZIP Code	\$25.00	
	707 W 34th St Apt 3115 Austin, TX 7870	05-1204			
				(if travel outside o	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)		10 Emple	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/23/2014	Ford Alexander			contribution	description (if applicable)
•	6. Contributor address: Ci	ty State	ZIP Code	\$350.00	
	200 W Cesar Chavez St Ste 250 Austin,	ΓX 78701-4049			
		-		(if travel outside o	Texas, complete Schedule T)
Principal occu     Real Estate	pation / Job title (See Instructions)		1	oyer (See Instruction exford Commercial	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Janet Allen			contribution	description (if applicable)
	6. Contributor address: Ci	ty State	ZiP Code	\$175.00	
	403 Buckeye Trl West Lake Hills, TX 78	3746-4423			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)		10 Empl	oyer (See Instruction	s)
	•				

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## SCHEDULE A

The	Instruction Guide explains how to	o complete th	is form.		1. Total pages Sche	
2. FILER NAME	Stephen Adler	·				hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution
09/ <b>2</b> 5/2014	Wilson Allen	<del></del>				description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$175.00	
	403 Buckeye Trl West Lake Hills,	TX 78746-442	3			
					(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Emplo	oyer (See Instruction:	5)
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution
09/23/2014	Patricia Alofsin	_			contribution	description (if applicable)
	6. Contributor address:	City S	State	ZIP Code	\$350.00	
	1801 Lavaca St # 10 Austin, TX 78	8701-1341				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Emple	oyer (See Instruction:	s)
Government	al Relations			C	ity of Austin	
4. Date	5. Full name of contributor	out-of-state	PAC _		7. Amount of	8. In-kind contribution
09/25/2014	Marion Alsup				contribution	description (if applicable)
	6. Contributor address:	City S	State	ZIP Code	\$100.00	
	2311 Pruett St Austin, TX 78703-4	1337				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state	PAC _		7. Amount of	8. In-kind contribution
09/25/2014	Mitchell K Alsup	—			contribution	description (if applicable)
	6. Contributor address:	City 5	State	ZIP Code	\$100.00	
	2311 Pruett St Austin, TX 78703-4	1337				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	is)		10 Empl	oyer (See Instruction	s)

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The I	nstruction Guide explains how to comple	e this form.		Total pages Sche 209		
2. FILER NAME	Stephen Adler			3. ACCOUNT#(Et	hics Commission Filers)	
4. Date	5. Full name of contributor out-o	-state PAC		7. Amount of	8. In-kind contribution	
09/10/2014	Shahin Alvi			contribution	description (if applicable)	
	6. Contributor address: City	State	ZIP Code	\$350.00		
	1107 Quaker Ridge Dr Austin, TX 78746-63	40				
				(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)     Home maker				0 Employer (See Instructions) None		
4. Date	5. Full name of contributor	f-state PAC		7. Amount of	8. In-kind contribution	
09/04/2014	Gregory Aman			contribution	description (if applicable)	
0370 11 2011	6. Contributor address: City	State	ZIP Code	\$100.00		
ļ	,	Glate	Zii Oode		·	
	7203 Holly Fern Cv Austin, TX 78750-7901	•				
0. D-ii1			40 5		Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)		10 Empi	oyer (See Instruction	s) 	
4. Date	5. Full name of contributor	f-state PAC		7. Amount of	8. In-kind contribution	
09/04/2014	Peter Aman			contribution	description (if applicable)	
	6. Contributor address: City	State	ZIP Code	\$200.00		
	3202 Clumpgrass Cv Austin, TX 78735-153:	5				
	,		*	(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)		10 Empi	oyer (See Instruction	<u>.</u>	
Retired	· · · · · · · · · · · · · · · · · · ·		N	lone		
4. Date	5. Full name of contributor	f-state PAC ·		7. Amount of	8. In-kind contribution	
08/05/2014	Sarah Andre			contribution	description (if applicable)	
	6. Contributor address: City	State	ZIP Code	\$350.00		
_	702 San Antonio St Austin, TX 78701-2834					
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)		10 Empl	oyer (See Instruction	s)	
Consultant -	Real Estate Development		S	tructure Development		

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					1 Total pages Cale	adula A:	
The	Instruction Guide explains how to	complete this t	form.		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adjer		<del>-</del>			hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PA	AC		7. Amount of	8. In-kind contribution	
08/11/2014	Eva K Andries				1	description (if applicable)	
	Contributor address:	City Sta	te ZI	P Code	\$100.00		
	5209 Cloudcroft Dr Austin, TX 78	749-2932					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Emple	oyer (See Instructions	5)	
4. Date	5. Full name of contributor	out-of-state PA	AC		7. Amount of	8. In-kind contribution	
09/25/2014	Paul Arcediano				contribution	description (if applicable)	
	6. Contributor address:	City Sta	ite ZII	P Code	\$350.00		
	1127 Old Bastrop Hwy Austin, TX	78742-2632					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction:	s)		10 Empl	oyer (See Instruction	s)	
Owner				R	&R Limousine and Bu	S	
4. Date	5. Full name of contributor	out-of-state P/	AC .		7. Amount of	8. In-kind contribution	
09/25/2014	Colin Armstrong	_	,		contribution	description (if applicable)	
	6. Contributor address:	City Sta	ite Zi	P Code	\$250.00		
	  5905 Fairlane Dr Austin, TX 7875	7-4416					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	
Real Estate				A	RM Management		
4. Date	5. Full name of contributor	out-of-state P/	AC		7. Amount of	8. In-kind contribution	
09/13/2014	Drew Arnold	_			contribution	description (if applicable)	
	6. Contributor address:	City Sta	ate Zi	P Code	\$25.00		
	4703 Avenue F Austin, TX 78751-	3114					
				t	(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	
1							

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The Instruction Guide explains how to complete this form.						Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/21/2014	Orlando R Arriaga				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$175.00		
	5503 New Haven Ct Austin, TX 78	3756-1801				ر	
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occ	upation / Job title (See Instruction	s)		10 Emp	loyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/21/2014	Yolanda Arriaga	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$175.00		
	5503 New Haven Ct Austin, TX 78	3756-1801					
	·				(if travel outside o	Texas, complete Schedule T)	
9. Principal occ	upation / Job title (See Instruction	s)		10 Emp	loyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of	8. In-kind contribution	
09/18/2014	Vince Ashwill				contribution	description (if applicable)	
•	6. Contributor address:	City	State	ZIP Code	\$350.00		
	6008 Nasco Dr Austin, TX 78757-	3118					
					(if travel outside o	Texas, complete Schedule T)	
Principal occ     Restaurant	cupation / Job title (See Instruction Operator	s)			loyer (See Instruction FBK Mgt	s)	
4. ⊧Date	5. Full name of contributor	out-of-	state PAC _		7. Amount of	8. In-kind contribution	
09/10/2014	Wolfred Charles Attal				contribution	description (if applicable)	
,	6. Contributor address:	City	State	ZIP Code	\$350.00		
	12 Skyline Dr Austin, TX 78746						
	<u>.</u> .		<u>.                                    </u>		(if travel outside o	Texas, complete Schedule T)	
,	cupation / Job title (See Instruction	s)		1	loyer (See Instruction	s)	
Promoter					C3 Presents		

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### **SCHEDULE A**

The	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of	8. In-kind contribution	
09/09/2014	Joy Authur	<del></del>			contribution	description (if applicable)	
	Contributor address;	City	State	ZIP Code	\$300.00	·	
	815A Brazos St # 323 Austin, TX 7	78701-2502		•			
					(if travel outside o	Texas, complete Schedule T)	
<ol><li>Principal occu</li></ol>	pation / Job title (See Instructions	s)		•	oyer (See Instruction	•	
Director of D	evelopment			P	eople's Community Cli	nic	
4. Date	5. Full name of contributor	out-of-st	tate PAC _	-	7. Amount of contribution	In-kind contribution description (if applicable)	
09/23/2014	Clayton Aynesworth				\$350.00		
	Contributor address:	City	State	ZIP Code	,,,,,,		
	3708 Meadowbank Dr Austin, TX	78703-1026					
					(if travel outside o	Texas, complete Schedule T)	
<ol><li>Principal occu</li></ol>	pation / Job title (See Instructions	s)			oyer (See Instruction	· ·	
Owner				(	Castle Hill Integrative F	itness, LLC	
4. Date	5. Full name of contributor	out-of-st	tate PAC		7. Amount of	8. In-kind contribution	
08/06/2014	Brian A Bailey				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00	·	
	2414 Exposition Blvd Ste B100 Au	ıstin, TX 78	703-2272				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empi	loyer (See Instruction	5)	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
08/07/2014	Debra Bailey				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	8500 Andreas Cv Austin, TX 7875	9-7926					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Emp	loyer (See Instruction	s)	

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The	Instruction Guide explains how t	1. Total pages Sch				
2. FILER NAME	Stephen Adler			<del>, _</del>	3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
08/06/2014	Gwyn S Bailey			· - ·	contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	,
	2414 Exposition Blvd Ste B100 A	ustin, TX 78	3703-2272			
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Em	ployer (See Instruction	S)
4. Date	5. Full name of contributor	Out-of-	state PAC		7. Amount of	8. In-kind contribution
08/21/2014	Susan Bailey	_			contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$150.00	
	2407 Bridle Path Austin, TX 7870	3-3209		•		
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Em	ployer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-:	state PAC		7. Amount of	8. In-kind contribution
09/16/2014	Joann Baker				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$125.00	
	959 Blue Spring Cv Round Rock,	TX <b>7</b> 8681-4	1044			
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)		10 Em	ployer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of	8. In-kind contribution
09/16/2014	Joe M Baker				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$125.00	
	959 Blue Spring Cv Round Rock,	TX 78681-4	1044			
		<u>.</u>			(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)		10 Em	ployer (See Instruction	ns)
1						

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### **SCHEDULE A**

The I	nstruction Guide explains how to		Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Eti	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC _			8. In-kind contribution	
07/15/2014	Gerald Balaka				•	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
	1800 W 34th St Austin, TX 78703-	1317					
					(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	s)		10 Emplo	oyer (See Instructions	3)	
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/09/2014	Jannis Baldwin	_			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	PO Box 1526 Austin, TX 78767-15	526					
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Empl	oyer (See Instruction:	s)	
Homemaker				N	оле		
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/09/2014	Robert Baldwin	,			contribution \$350.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$330.00		
	PO Box 1526 Austin, TX 78767-15	526					
					(if travel outside o	Texas, complete Schedule T)	
Principal occup     Car Dealer	pation / Job title (See Instruction	s)		· ·	10 Employer (See Instructions) Self		
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/10/2014	Scott Ballew				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$25.00		
	PO Box 2410 Austin, TX 78768-24	410					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	

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### SCHEDULE A

The	instruction Guide explains how to	n complete	this form		1. Total pages Scho	edule A:	
						209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/24/2014	Peter Barbour	•			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00	·	
	1143 Hidden Valley Ranch Rd Joh	nson City, T	ГХ 78636-	4379			
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/12/2014	Barry Barksdale	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	PO Box 1606 Austin, TX 78767-16	606		·			
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	
President				F	DS Energy Information	1	
4. Date	Full name of contributor	oul-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/12/2014	Dinah Barksdale				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	PO Box 1606 Austin, TX 78767-10	606					
		•		·	(if travel outside o	Texas, complete Schedule T)	
Principal occul     Homemaker	pation / Job title (See Instruction	ıs)			loyer (See Instruction None	s)	
4. Date	5. Full name of contributor	Out-of-	state PAC		7. Amount of	8. In-kind contribution	
09/05/2014	Alison Barnwell	_			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$250.00		
	1801 Alta Vista Ave Austin, TX 7	8704-3152					
		·			(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ns)		10 Emp	loyer (See Instruction	s)	
Broker				·	ive Oak Gottesman		

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### SCHEDULE A

The	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler					3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	Out-of-s	state PAC			7. Amount of	8. In-kind contribution
09/25/2014	Rossana Barrios	_	_			contribution	description (if applicable)
	6. Contributor address:	City	State	ZIF	Code	\$50.00	
	7452 Pusch Ridge Loop Austin, TX	K 78749-24	60				
						(if travel outside of	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instruction	s)		ŀ	10 Emplo	oyer (See Instructions	s)
4. Date	5. Full name of contributor	Out-of-s	state PAC				8. In-kind contribution
09/25/2014	Rossana Barrios	_	_			contribution	description (if applicable)
	6. Contributor address:	City	State	ZIF	Code	\$20.00	
	7452 Pusch Ridge Loop Austin, TX	,				·	
	7432 Fuscii Riage Loop Austii, 12	X 10143-44	00			(if termed autoide a	Tayaa samalata Sahadula T)
Principal occupation / Job title (See Instructions)			Γ.	IO Emple	over (See Instruction	Texas, complete Schedule T)	
3. Tillopal occu		<del></del> -			TO EMP	oyer (Gee maddedon	
4. Date	5. Full name of contributor	Out-of-	state PAC			7. Amount of	8. In-kind contribution
09/05/2014	Barbara Barron		-			contribution	description (if applicable)
	6. Contributor address:	City	State	ZIF	Code	. \$250.00	
-	  6502 Sumac Dr Austin, TX 78731-	-4117					
	oboz daniae pri rabilit, riv rovov	,				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	L	s)		1	10 Empl	oyer (See Instruction	<u> </u>
Attorney		<u> </u>			•	NPC Law	
4. Date	5. Full name of contributor	Out-of-	state PAC			7. Amount of	8. In-kind contribution
09/23/2014	Maureen E Barry	<del></del>				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIF	Code	\$125.00	
	2508 Addison Ave Austin, TX 787	757-2313					
						(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ıs)			10 Empl	oyer (See Instruction	s)
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### **SCHEDULE A**

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The I	nstruction Guide explains how to	complete th	is form.		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				3. ACCOUNT#(Eti	nics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state	PAC			8. In-kind contribution	
08/22/2014	Michelle Bartholomew	_			contribution	description (if applicable)	
	Contributor address:	City	State Z	IP Code	. \$350.00		
	5716 W Highway 290 Ste 100 Austin	ı, TX 78735	-8719				
					(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions)			10 Emplo	yer (See Instructions	3)	
Homemaker				N-	one		
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution	
08/22/2014	Steve Bartholomew		-			description (if applicable)	
	6. Contributor address:	City 5	State Z	IP Code	\$350.00		
	   5716 W Highway 290 Ste 100 Austi	n, TX 78735	-8719				
	,			~	(if travel outside of	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10 Emple					yer (See Instruction	s)	
Home Builde	r		<u>-</u>	Т-	exas Capital Builders		
4. Date	5. Full name of contributor	out-of-state	PÁC	:	7. Amount of	8. In-kind contribution	
07/01/2014	Jet Bartlett				contribution	description (if applicable)	
,	Contributor address:	City	State Z	IP Code	\$350.00		
	   2508 Greenlee Dr # 1 Austin, TX 78	703-1715				; 	
	· ·				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)	1		10 Emplo	oyer (See Instruction	s)	
Real Estate				1 6	. 1.0		
Treat Estate				3	elf		
4. Date	5. Full name of contributor	out-of-state	e PAC	30	7. Amount of	8. In-kind contribution	
	Full name of contributor     Lydia Barton	out-of-state	e PAC	30	7. Amount of contribution	In-kind contribution description (if applicable)	
4. Date		_		ZIP Code	7. Amount of		
4. Date	Lydia Barton	City			7. Amount of contribution		
4. Date	Lydia Barton  6. Contributor address:	City			7. Amount of contribution \$350.00		
4. Date 09/11/2014	Lydia Barton  6. Contributor address:	City :		ZIP Code	7. Amount of contribution \$350.00	description (if applicable) Texas, complete Schedule T)	

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### SCHEDULE A

The	Instruction Guide explains how to	complete this form	<del>-</del> ۱.	1. Total pages Scho	<b>\</b>
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	Full name of contributor	out-of-state PAC	· · · · · · · · · · · · · · · · · · ·	7. Amount of	8. In-kind contribution
08/14/2014	Frank N. Bash			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$125.00	
	311 Ridgewood Rd Austin, TX 787	746-4618			
		·		(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/16/2014	Linda Battles			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	·
	103 Olympic Dr Pflugerville, TX 7	8660-4786			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/24/2014	Meade Bauer			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	3928 Balcones Dr Austin, TX 7873	31-5810			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/06/2014	Chris Bea			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$25.00	
	1008 Kinney Ave Austin, TX 7870	04-2138	•		1
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)

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## **SCHEDULE A**

The	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution		
09/13/2014	Paula Beaird				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$25.00			
	PO Box 3223 Austin, TX 78764-32	23						
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	s)		10 Empl	oyer (See Instruction	s)		
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution		
08/22/2014	Roger Beasley	_	_		contribution	description (if applicable)		
	Contributor address:	City	State	ZIP Code	\$350.00			
	6503 Santolina Cv Austin, TX 7873	31-2806						
				•	(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	3)		10 Empl	oyer (See Instruction	s)		
Owner		<u>.</u>	-	R	loger Beasley			
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of	8. In-kind contribution		
09/24/2014	Q Newton Beck				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$50.00			
	1511 Justin Ln Austin, TX 78757-2	2534						
				•	(if travel outside o	Texas, complete Schedule T)		
9: Principal occu	upation / Job title (See Instructions	s)		10 Empl	loyer (See Instruction	s)		
4. Date	5. Full name of contributor	out-of-a	state PAC		7. Amount of	8. In-kind contribution		
09/24/2014	Carolyn Beckett				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$350.00	·		
	7512 Stepdown Cv Austin, TX 787	31-1141						
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occi	upation / Job title (See Instructions	s)		10 Emp	loyer (See Instruction	s)		
Attorney				E	Beckett Tackett & Jetel			

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## **SCHEDULE A**

The I	nstruction Guide explains how to c	omplete this	form.		Total pages Sche 209	
2. FILER NAME	Stephen Adler	··········			3. ACCOUNT # (Eti	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state Pa	AC		7. Amount of	8. In-kind contribution
08/21/2014	Rudy Belton	_			contribution	description (if applicable)
	6. Contributor address:	City Sta	ite Z	IP Code	\$350.00	
-	505 E Huntland Dr Ste 530 Austin, TX	X 78752-3760				
					(if travel outside of	Texas, complete Schedule T)
9. Principal occur	pation / Job title (See Instructions)	· ·		10 Employer (See Instructions)		
Real Estate				B∈	elco Equities, Inc.	
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of	8. In-kind contribution
08/21/2014	Sally Belton				contribution	description (if applicable)
	Contributor address:	City Sta	ate Z	IP Code	\$350.00	
	112 Birnam Wood Ct Austin, TX 787	46-4500				
	, , , , , , , , , , , , , , , , , , , ,				(if travel outside o	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)				10 Emplo	yer (See Instruction:	•
Real Estate	_			В	elco Equities, Inc.	
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of	8. In-kind contribution
09/23/2014	Michael Benaglio	_			contribution	description (if applicable)
	Contributor address:	City Sta	ate Z	IP Code	\$250.00	
	   11419 Sierra Blanca St Austin, TX 78	3726-1438				
	in the state of the state, the state of the	720 (100			(if travel outside o	Texas, complete Schedule T)
9. Principal occur	Loation / Job title (See Instructions)			10 Emplo	oyer (See Instruction	<u> </u>
Business App	•			1	he Benaglio Group, LL	·
4. Date	5. Full name of contributor	out-of-state P	AC .		7. Amount of	8. In-kind contribution
07/16/2014	Blair Beneke		_		contribution	description (if applicable)
	Contributor address:	City Sta	ate Z	IP Code	\$50.00	
	1301 W Lynn St Apt 301 Austin, TX	78703-3973				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions)			10 Emple	oyer (See Instruction	s)

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## **SCHEDULE A**

The I	nstruction Guide explains how to	complete	this form		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler					hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
09/23/2014	Frances Bennett	_			contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$350.00		
	4120 Edwards Mountain Dr Austin,	TX 78731	-3901				
					(if travel outside of	Texas, complete Schedule T)	
<ol><li>Principal occup</li></ol>	pation / Job title (See Instructions	.)		· ·	oyer (See Instructions	5)	
Attorney				Be	ennett Flaherty, PLLC		
4. Date	Full name of contributor	out-of-s	tate PAC		7. Amount of contribution	In-kind contribution description (if applicable)	
09/03/2014	T. Craig Benson				\$350.00	description (if applicable)	
	Contributor address:	City	State	ZIP Code			
	1415 Wathen Ave Austin, TX 7870	3-2527				1	
					(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	;)	- · · · · · · · · · · · · · · · · · · ·	10 Emplo	oyer (See Instruction:	s)	
Chief Execut	ive Officer			C	allaway Partners, LP		
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
09/23/2014	Jeremiah Bentley				contribution \$50.00	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$30.00		
	11206 Morning Glory Trl Austin, T	X 78750-1	944				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)		10 Emplo	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/11/2014	Susan Benz	· <del></del>			contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$100.00		
	1101 - B East 6th St Austin, TX 787	702-3210					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction	s)	

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### SCHEDULE A

The !	nstruction Guide explains how to complete t		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor out-of-sta	te PAC		7. Amount of	8. In-kind contribution
09/24/2014	Donna Berber			contribution	description (if applicable)
	6. Contributor address: City	State Z	IP Code	\$350.00	
	3600 N Cap of TX Hwy Bldg B Ste 330 Austin,	TX 78746			
				(if travel outside of	Texas, complete Schedule T)
9. Principal occur	pation / Job title (See Instructions)		,	oyer (See Instruction:	
President			A	Glimmer of Hope Fou	ndation
4. Date	5. Full name of contributoroul-of-sta	te PAC		7. Amount of contribution	In-kind contribution description (if applicable)
09/24/2014	Jake Berber			\$350.00	
	6. Contributor address: City	State Z	IP Code		
	1103 Crystal Creek Dr Austin, TX 78746-4713				
				(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions)		10 Emple	oyer (See Instruction	s)
Student			N	one	
4. Date	5. Full name of contributorout-of-sta	te PAC		7. Amount of	8. In-kind contribution
09/24/2014	Philip R. Berber			contribution	description (if applicable)
	6. Contributor address: City	State Z	IP Code	\$350.00	
	3600 N Capital Of Texas Hwy Bldg. B, Suite 33	0 Austin, T	X		
	78746-3314			(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions)		10 Empl	oyer (See Instruction	s)
Founder			E	nable Impact	
4. Date	5. Full name of contributor out-of-sta	ite PAC		7. Amount of	8. In-kind contribution
09/24/2014	Ryan Berber			contribution	description (if applicable)
	6. Contributor address: City	State Z	IP Code	\$350.00	
	1221 S Congress Ave Apt 731 Austin, TX 7870	4-2406			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions)		10 Empl	oyer (See Instruction	s)
Finance Cons	sultant		S	elf	

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### SCHEDULE A

The	Instruction Guide explains how t	o complete	this form		Total pages School     209	· ·
2. FILER NAME	Stephen Adler		<del></del>		3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution
09/24/2014	Shane Berber				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	210 Lee Barton Dr Unit 217 Austii	n, TX 78704	-1044			
		1			(if travel outside o	Texas, complete Schedule T)
9. Principal occu Owner	pation / Job title (See Instruction	s)		· '	oyer (See Instruction Trystal Creek Moonshin	· ·
4. Date	5. Full name of contributor		ate PAC		7. Amount of	8. In-kind contribution
09/25/2014	James Bernard	out-or-st	ate PAC _		contribution	description (if applicable)
09/23/2014		0	<b>.</b> .	710.0	\$50.00	
	6. Contributor address:	City	State	ZIP Code	·	
	7140 Chimney Cors Austin, TX 78	3731-2100				
						Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	is)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution
08/28/2014	Celia O Berry	· —	_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
	6001 Shoal Creek Blvd Austin, TX	<b>C</b> 78757-312	7			
			1		(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	is)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
08/28/2014	Chris W Berry				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
	6001 Shoal Creek Blvd Austin, T	K 78757-312	7			
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Empl	loyer (See Instruction	s)

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## **SCHEDULE A**

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The I	nstruction Guide explains how to	complete t	this form.			Total pages Schedule A:		
2. FILER NAME	<u> </u>	<u> </u>			<u>-</u>	209		
2. TILLER NAIVIE	Stephen Adler					3. ACCOUNT#(EII	nics Commission Filers)	
4. Date	5. Full name of contributor	out-of-sta	ate PAC			7. Amount of	8. In-kind contribution	
08/25/2014	Charles A Betts					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP	Code	\$250.00		
	14741 Arrowhead Dr Volente, TX 7	8641-9122						
						(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions)	)		1	0 Emplo	yer (See Instructions	s)	
Executive Dir	rector	<u>.</u>			D	owntown Austin Alliar	nce	
4. Date	5. Full name of contributor	out-of-sta	ste PAC			7. Amount of	8. In-kind contribution	
07/08/2014	Laura A Beuerlein					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP	Code	\$350.00		
	2605 Woodmont Ave Austin, TX 78	3703-3260						
						(if travel outside of	Texas, complete Schedule T)	
9. Principal occuj	pation / Job title (See Instructions	)		1	0 Emplo	yer (See Instruction:	s)	
Owner					H	eritage Title Company	of Austin, Inc	
4. Date	5. Full name of contributor	out-of-st	ate PAC			7. Amount of	8. In-kind contribution	
08/11/2014	Zachary Biderman					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP	Code	\$250.00		
	  1529 Barton Springs Rd Apt 15 Aus	tin, TX 787	04-1014					
		1				(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)		1	0 Emplo	oyer (See Instruction	s)	
Dog Kennel					Н	appy Mailman		
4. Date	5. Full name of contributor	out-of-st	ate PAC			7. Amount of	8. In-kind contribution	
07/29/2014	Jay Billig					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP	Code	\$350.00		
	806 Bouldin Ave Apt B Austin, TX	78704						
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)	•	1	10 Emplo	oyer (See Instruction	s)	
Architect					S	elf		

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### SCHEDULE A

The	Instruction Guide explains how to		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler			<del> </del>	3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tate PAC _	·	7. Amount of contribution	In-kind contribution description (if applicable)
09/22/2014	Betty Blackson				\$250.00	description (ii applicable)
	6. Contributor address:	City	State	ZIP Code	\$230.00	
	9803 Mandeville Cir Austin, TX 7	8750-2811				
	<u>.</u>				(if travel outside of	Texas, complete Schedule T)
· ·	pation / Job title (See Instruction	s)		10 Emplo	oyer (See Instruction:	5)
Import Clear	ance			D	ell	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution
09/22/2014	Betty Blackson				contribution \$26.00	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$20.00	
	9803 Mandeville Cir Austin, TX 7	8750-2811				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)
Import Clear	ance			D	ell	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/22/2014	Steve Blackson				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$26.00	
	9803 Mandeville Cir Austin, TX 7	8750-2811				
,	,				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
07/16/2014	Julie Blakeslee				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	1700 San Gabriel St Austin, TX 78	3701-1029				
					(if travel outside o	Texas, complete Schedule T)
O Principal cook					1	·
9. Fillicipal occu	pation / Job title (See Instruction	ıs)			oyer (See Instruction ig Red Sun	s)

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## SCHEDULE A

<b>T</b> ⊢ - 1	materials Cuids and be to			Total pages Schedule A:		
	nstruction Guide explains how to	complete this form	1. 	209		
2. FILER NAME	Stephen Adler		V	3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/22/2014	Barbara Bland			contribution	description (if applicable)	
	Contributor address:	City State	ZIP Code	\$175.00		
	5511 Lands End St Austin, TX 7873	34-1513				
				(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)	10 Emplo	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/22/2014	Joe Bland			contribution	description (if applicable)	
	Contributor address:	City State	ZIP Code	\$175.00		
	5511 Lands End St Austin, TX 7873	34-1513				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)	10 Emple	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
07/09/2014	Mimi Blankenship			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00	,	
	13815 Pecan Dr Unit 4 Austin, TX	78734-5834				
	· · · · · · · · · · · · · · · · · · ·			(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Scott Blech			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$50.00		
	3503 Needles Dr Austin, TX 78746	-1457				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	3)	10 Empl	oyer (See Instruction	s)	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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### **SCHEDULE A**

The	Instruction Guide explains how to	<b>n</b> .	Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Brenda Blue				description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	61 Pascal Ln Austin, TX 78746-252	29	•	!	
				(if travel outside of	Texas, complete Schedule T)
•	pation / Job title (See Instructions	3)	,	oyer (See Instructions	s)
Homemaker			N	one	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution	In-kind contribution description (if applicable)
09/25/2014	Michael Blue			\$350.00	description (it applicable)
	6. Contributor address:	City State	ZIP Code	\$550.00	
	61 Pascal Ln Austin, TX 78746-25	29			
	·			(if travel outside o	Texas, complete Schedule T)
	pation / Job title (See Instruction	s)		oyer (See Instruction	s)
Partner			E	Y	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution	In-kind contribution description (if applicable)
08/05/2014	Bill Bock			\$350.00	ideactibilion (ii applicable)
	6. Contributor address:	City State	ZIP Code	ψ350.00	
	210 Lavaca St Apt 2502 Austin, T2	X 78701-4590			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)	<u> </u>	oyer (See Instruction	s)
President			S	ilicon Labs	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/29/2014	Jill Bohnen			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	3104 Hidden Hills Lane Cedar Pari	k,TX 78613			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)

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### **SCHEDULE A**

The I	instruction Guide explains how to	complete	this form		1. Total page	Total pages Schedule A:     209	
2. FILER NAME	Stephen Adier			-	3. ACCOUN	T # (Ethics Comr	nission Filers)
9. Principal occu	5. Full name of contributor John Bohnen 6. Contributor address: 3104 hidden hills lane Bldg. 1, Suit		State		(if travel or	descriptions description descr	d contribution in (if applicable) mplete Schedule T)
Home Buildi					Standard Pacific		
4. Date 09/23/2014	Full name of contributor     Jeff Bomer     Contributor address:     Northumberland Rd Austin, T	City	state PAC _ State	ZIP Cod			d contribution on (if applicable)
	,				(if travel o	utside of Texas, co	mplete Schedule T)
Principal occul     Real Estate	pation / Job title (See Instructions	s)		10 E	mployer (See Inst Kennedy Wilson	ructions)	
4. Date 09/13/2014	<ul><li>5. Full name of contributor</li><li>Evelyn Miller Bonar</li><li>6. Contributor address:</li><li>2423 Forest Ave Austin, TX 78704</li></ul>	City	State PAC _	ZIP Cod			d contribution on (if applicable)
					(if travel o	utside of Texas, co	mplete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	•	10 E	mployer (See Insi	ructions)	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount o		d contribution
09/22/2014	Max Bookman 6. Contributor address: 1221 S Congress Ave Apt 217 Aus	City tin, TX 787	State 704-2403	ZIP Cod	de	200.00	on (if applicable) omplete Schedule T)
I	pation / Job title (See Instruction	s)		10 E	mployer (See Ins	=	
Fitness Profe	ssional				Max Training, L	LC	

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## **SCHEDULE A**

The	Instruction Guide explains how to	complete this for	m.	Total pages School     209	
2. FILER NAME	Stephen Adler	<del></del>		3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)
09/10/2014	Flannery Bope  6. Contributor address:	City State	ZIP Code	\$25.00	accompany (ii application)
	1512 Holstein Dr Apt 815 Austin, T	•	ZIF Code		
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)	10 Empl	loyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution	In-kind contribution description (if applicable)
09/23/2014	Flannery Bope			\$50.00	description (ii applicable)
	6. Contributor address:	City State	ZIP Code		
	1512 Holstein Dr Apt 815 Austin, 7	°X 78758-3643	1		
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)	10 Emp	loyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Flannery Bope	,		contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$50.00	
	1512 Holstein Dr Apt 815 Austin, 7	TX 78758-3643			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	10 Emp	loyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/24/2014	Julie Boxberger			contribution \$50.00	description (if applicable)
-	6. Contributor address:	City State	ZIP Code	\$30.00	
	1301 West Lynn, 104 104 Austin, 7	ΓX 78701-1715			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)	10 Emp	loyer (See Instruction	is)

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### SCHEDULE A

The	Instruction Guide explains how to	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Eti	hics Commission Filers)
4. Date	Full name of contributor	Out-of-state PAC		7. Amount of	In-kind contribution
07/22/2014	Bill Bradshaw				description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	4006 Lewis Ln Austin, TX 78756-30	521			
				(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)	10 Emplo	oyer (See Instructions	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/30/2014	Adrianne Brandt			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	2805 Quail Run Dr Round Rock, TX	( 78681-1206			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)	10 Emple	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/03/2014	Floyd S Brandt				description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$105.00	·
	4200 Jackson Ave Apt 5012 Austin,	TX 78731-6068			
	ļ		4	(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/28/2014	Lietza Koock Brass	_	_	contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$50.00	
	5700 Wynona Ave Austin, TX 7875	6-1128			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)	10 Empl	oyer (See Instruction	s)

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### **SCHEDULE A**

The I	nstruction Guide explains how to	complete	this form.	. •	Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Eti	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-st	tate PAC		7. Amount of	8. In-kind contribution	
09/16/2014	Russell B. Bridges	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	6405 Cascada Dr Austin, TX 78750	-8156					
					(if travel outside of	Texas, complete Schedule T)	
9. Principal occur	pation / Job title (See Instructions	3)		10 Emplo	oyer (See Instructions	s)	
Government :	and Community Affairs Manager			31	<u>M</u>		
4. Date	5. Full name of contributor	out-of-si	tate PAC _		7. Amount of	8. In-kind contribution	
09/02/2014	Chandra Briggman				contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$100.00		
	43 Rainey St Austin, TX 78701-442	26					
	,				(if travel outside of	Texas, complete Schedule T)	
9. Principal occur	Principal occupation / Job title (See Instructions)				oyer (See Instruction		
	•	•				,	
4. Date	5. Full name of contributor	out-of-s	tate PAC	•	7. Amount of	8. In-kind contribution	
09/13/2014	Nick Brizendine		_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	7811 Moonflower Dr Austin, TX 78	•					
·	7811 WOOMHOWELDI Ausum, 1A 76	110-7011			//f.tt/d-1-d		
9 Principal accur	L pation / Job title (See Instructions			10 Empl	· · · · · · · · · · · · · · · · · · ·	Texas, complete Schedule T)	
9. Principal occup		>)		TO Empire	oyer (See Instruction	5)	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
09/24/2014	Judith Brodsky	—	-	<del> </del>	contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$50.00		
	157 E 57th St Apt 4A New York, N	IY 10022-2	143			,	
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Empl	oyer (See Instruction	s)	

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### SCHEDULE A

The	Instruction Guide explains how to	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler				thics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/22/2014	Liz Bronson			contribution	description (if applicable)
	Contributor address:	City State	ZIP Code	\$25.00	
	7704 W Rim Dr Austin, TX 78731	-1230			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/24/2014	Hayden Brooks			contribution	description (if applicable)
	Contributor address:	City State	ZIP Code	\$350.00	
	1804 Lakeshore Dr Austin, TX 78	746-3716			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	<u>'</u>
Real Estate			A	merican Realty	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/23/2014	David Brown			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	III Congress Ave Ste 2800 Austir	, TX 78701-4084			
				(if travel outside o	Texas, complete Schedule T)
<ol><li>Principal occu</li></ol>	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	ns)
Attorney			E	well Brown & Blake I	LP
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/23/2014	Janna M Brown			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	10072 Circleview Dr Austin, TX 7	8733-6302			
				(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	ns)
Homemaker			N	Jone	

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### SCHEDULE A

The	Instruction Guide explains how to	complete	this form		Total pages Scho     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-si	tate PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)
09/25/2014	Michael Brown				\$200.00	description (ii applicable)
	6. Contributor address:	City	State	ZIP Code		
	1802 Mistywood Dr Austin, TX 78'	746-7804				
					1	Texas, complete Schedule T)
9. Principal occul Banker	pation / Job title (See Instructions	s)			oyer (See Instruction) exas Capital Bank	s)
				¹'		
4. Date	5. Full name of contributor	Out-of-si	tate PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)
09/17/2014	Robert Brown				\$350.00	, , , ,
	6. Contributor address:	City	State	ZIP Code		
	3208 Greenlee Dr Austin, TX 7870	3-1622				
					(if travel outside o	Texas, complete Schedule T)
,	pation / Job title (See Instructions	s)			oyer (See Instruction	s)
None				N	one	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)
09/15/2014	Travis Brown				\$100.00	description (ii applicable)
	6. Contributor address:	City	State	ZIP Code	, \$100.00	
	7006 Daugherty St Austin, TX 787:	57-2116				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	3)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution
09/15/2014	Gabe Bruehl				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$175.00	
	5202 Scenic View Dr Austin, TX 7	8746-2241				,
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)		10 Empl	oyer (See Instruction	s)

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### SCHEDULE A

The	Instruction Guide explains how to c	omplete ti	his form.		Total pages Sche     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Eti	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-sta	te PAC			8. In-kind contribution
09/15/2014	Jessica Bruehl			~		description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$175.00	
	5202 Scenic View Dr Austin, TX 787	46-2241				
					(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)			10 Emplo	oyer (See Instructions	s) ,
4. Date	5. Full name of contributor [	out-of-sta	te PAC			8. In-kind contribution
09/22/2014	Barton Bryan	-	_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
	8205 Ganttcrest Dr Austin, TX 78749	•				
			,		(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)			10 Emplo	oyer (See Instruction	
		<u> </u>				
4. Date	5. Full name of contributor	out-of-sta	te PAC _		7. Amount of	8. In-kind contribution
09/22/2014	Valerie Bryan				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
	8205 Gantterest Dr Austin, TX 78749	<b>)-3518</b>				
			٠		(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)			10 Emple	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-sta	ite PAC _		7. Amount of	8. In-kind contribution
07/01/2014	Amy Bryant				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
	921 E 39th St Austin, TX 78751-5204	4				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)			10 Empl	oyer (See Instruction	s)

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### **SCHEDULE A**

The I	nstruction Guide explains how to	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date 08/11/2014	5. Full name of contributor Michael Buls	out-of-state PAC		7. Amount of contribution \$350.00	In-kind contribution description (if applicable)
	6. Contributor address: 1626 Enfield Rd Austin, TX 78703-3	City State 3429	ZIP Code	i (if travel outside o	Texas, complete Schedule T)
9. Principal occupation / Job title (See Instructions) 10 Em  Co-Founder				Dyer (See Instructions ulsHodge Consulting	L
4. Date 08/25/2014	Full name of contributor     Lisi Buongiorno	out-of-state PAC		7. Amount of contribution \$150.00	In-kind contribution description (if applicable)
	6. Contributor address: 801 W 5th St Apt 1909 Austin, TX 7	City State 78703-5460	ZIP Code		(Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)	)	10 Emple	oyer (See Instruction	<u> </u>
4. Date 09/25/2014	Full name of contributor     Cecelia Burke     Contributor address:	out-of-state PAC City State	ZIP Code	7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)
,	6500 Santolina Cv Austin, TX 7873 pation / Job title (See Instructions)			oyer (See Instruction	Texas, complete Schedule T)
Retired  4. Date	5. Full name of contributor	out-of-state PAC	l N	7. Amount of	8. In-kind contribution
09/09/2014	Stephen Burke 6. Contributor address: 3 Scott Cres Austin, TX 78703-1724	City State	ZIP Code	contribution \$25.00 (if travel outside o	description (if applicable) Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)	10 Empl	oyer (See Instruction	s)

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### SCHEDULE A

The I	The Instruction Guide explains how to complete this form.				Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
07/07/2014	Will Burkhardt	<u> </u>	_		contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$350.00	
	802 Christopher St Austin, TX 78	704-1618		•		
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Emple	oyer (See Instruction	s)
Architect				N N	Villiam Burkhardt, AIA	<u> </u>
4. Date	5. Full name of contributor	out-of-	state PAC _		7. Amount of contribution	In-kind contribution     description (if applicable)
08/29/2014	Amon Burton			•	\$350.00	
	Contributor address:	City	State	ZIP Code		
	4204 Avenue G Austin, TX 78751	-3816				
			s, 1		(if travel outside o	Texas, complete Schedule T)
9. Principal occur	pation / Job title (See Instruction	ns)		1	oyer (See Instruction	s)
Attorney				S	elf	
4. Date	5. Full name of contributor	out-of-	state PAC _		7. Amount of	8. In-kind contribution
09/25/2014	Carol Burton				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$200.00	
	4200 Avenue G Austin, TX 78751	-3816				
					(if travel outside o	Texas, complete Schedule T)
Principal occu     Artist	pation / Job title (See Instruction	ns)		1	oyer (See Instruction elf	s)
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of	8. In-kind contribution
09/19/2014	Cass Burton	_	-		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
	360 Nueces St Apt 1408 Austin, T	X 78701-42	262			-
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	s)

### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### **SCHEDULE A**

The I	nstruction Guide explains how to c	omplete	this form		Total pages School     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT#(Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-sta	ate PAC	5 15 5 5	7. Amount of	8. In-kind contribution
09/20/2014	Robert Burton	- <del></del>	_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	2125 Sea Eagle Vw Austin, TX 78738	8-5382				
					(if travel outside o	Texas, complete Schedule T)
<ol><li>Principal occup</li></ol>	pation / Job title (See Instructions)			10 Empl	oyer (See Instruction:	5)
Attorney	· · · · · · · · · · · · · · · · · · ·			W	Vinstead PC	
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)
08/27/2014	Merritt Bury				\$100.00	
	Contributor address:	City	State	ZIP Code		
	221 W 6th St Ste 600 Austin, TX 787	01-3411				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occuj	pation / Job title (See Instructions)	,	-	10 Empl	oyer (See Instruction	s)
4. Date	Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution
09/25/2014	Ann Butler				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	2 Niles Rd Austin, TX 78703-3139			•		
				ı	(if travel outside o	Texas, complete Schedule T)
1	pation / Job title (See Instructions)			· ·	oyer (See Instruction	s)
Retired				N	lone	
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of	8. In-kind contribution
09/25/2014	Edward Butler				contribution	description (if applicable)
1	6. Contributor address:	City	State	ZIP Code	\$350.00	
	301 Hillcrest Ct West Lake Hills, TX	78746-54	191			
L				<u> </u>	(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions)	at .	,	10 Empl	oyer (See Instruction	s)
Radio and Co	ommunications			S	elf	

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### **SCHEDULE A**

The	Instruction Guide explains how t		Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler	<u></u>			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state F	AC		7. Amount of	8. In-kind contribution	
09/23/2014	Mollie Butler				contribution	description (if applicable)	
	6. Contributor address;	City St	ate Z	IP Code	\$25.00		
	905 Old Stonehedge St West Lake	Hills, TX 78746	-3529				
					(if travel outside of	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	is)		10 Emplo	oyer (See Instruction:	s)	
4. Date	5. Full name of contributor	oul-of-state F	PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Renee Butler				contribution	description (if applicable)	
	6. Contributor address:	City St	ate Z	IP Code	\$350.00		
	301 Hillcrest Ct West Lake Hills,	ГХ 78746-5491					
-					(if travel outside o	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10 Emp				10 Emplo	oyer (See Instruction	s)	
, Homemaker				N	one	· ·	
4. Date	5. Full name of contributor	out-of-state F	PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Roy A Butler Jr.				contribution	description (if applicable)	
	6. Contributor address:	. City St	ate Z	IP Code	\$350.00	\ !	
	4105 Prince Andrew Ln Austin, T	X 78730-3458					
					(if travel outside o	Texas, complete Schedule T)	
<ol> <li>Principal occu</li> <li>Owner</li> </ol>	pation / Job title (See Instruction	ıs)	-	1 '	oyer (See Instruction onstant Communicatio	, .	
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Sheridan Butler				contribution	description (if applicable)	
	6. Contributor address:	City St	ate Z	IP Code	\$350.00		
	1603 Enfield Rd Ste 213 Austin, 7	TX 78703-3431					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ns)		10 Emple	oyer (See Instruction	s)	
Social Media Coordinator				M	Michael McCaul for Congress		

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### **SCHEDULE A**

The	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler	•			3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	5. Full name of contributor	out-of-	state PAC _		7. Amount of	8. In-kind contribution		
09/23/2014	Stephen Butler				contribution	description (if applicable)		
	Contributor address:	City	State	ZIP Code	\$25.00			
	905 Old Stonehedge St West Lake	Hills, TX 7	8746-3529	)				
		. <u> </u>			(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	is)	10 Emplo	oyer (See Instruction	s)			
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of	8. In-kind contribution		
09/02/2014	Brian Butterfield	<del>-</del> ,	_	_	contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$350.00			
	1305 Garner Ave Austin, TX 7870	14-2844						
	, , , , , , , , , , , , , , , , , , , ,				(if travel outside o	Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)				10 Emple	oyer (See Instruction	<u> </u>		
Real Estate B	roker			0	xford Commercial			
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of	8. In-kind contribution		
09/04/2014	David A Buttross				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$60.00			
	PO Box 5396 Austin, TX 78763-5	396						
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	10 Employer (See Instructions)			
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of	8. In-kind contribution		
09/25/2014	David Butts			. 1	contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$100.00			
	1914 Patton Ln Austin, TX 78723	-1236						
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	s)		

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### **SCHEDULE A**

The I	The Instruction Guide explains how to complete this form.					1. Total pages Schedule A: 209	
2. FILER NAME	Stephen Adler					3. ACCOUNT#(Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tate PAC				8. In-kind contribution
09/09/2014	Julie Byers					contribution	description (if applicable)
	Contributor address:	City	State	ZIP C	Code.	\$350.00	. ,
	4516 Balcones Dr Austin, TX 787.	31-5220					
		÷				(if travel outside or	Texas, complete Schedule T)
9. Principal occup Retired	pation / Job title (See Instruction	is)		10		oyer (See Instructions	s)
	· · · · · · · · · · · · · · · · · · ·				iNe		
4. Date	5. Full name of contributor	Out-of-s	state PAC _			7. Amount of contribution	In-kind contribution description (if applicable)
07/16/2014	Shayne Calhoun					\$25.00	description (ii applicable)
	6. Contributor address:	City	State	ZIP C	Code	\$23.00	
	1101 Brushy Creek Rd Apt 604 Ce						
	<b>.</b>					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ıs)		10	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	Out-of-s	state PAC			7. Amount of	8. In-kind contribution
09/18/2014	Cal Callahan	_	_			contribution	description (if applicable)
	Contributor address:	City	State	ZIP C	Code	\$350.00	,
	  4651 Rockeliff Rd Austin, TX 787	46-1237					
						(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)		10	Emplo	oyer (See Instruction	s)
General Man	ager				Pl	hoenix Rise	
4. Date	5. Full name of contributor	Out-of-s	state PAC			7. Amount of	8. In-kind contribution
09/24/2014	Crockett Camp					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP C	Code	\$350.00	
	6105 Mountain Villa Dr Austin, T.	X 78731-35	21				
	,					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)		10	Emple	oyer (See Instruction	s)
Consultant	·				C	rockett Camp	

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### **SCHEDULE A**

The	nstruction Guide explains how to		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-st	tate PAC		7. Amount of	8. In-kind contribution
09/19/2014	Amber Carden	_	_		contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$100.00	
	10807 Sans Souci Pl Austin, TX 78	3759-5151	•			
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Emplo	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-st	tate PAC		7. Amount of	8. In-kind contribution
09/16/2014	Sally Cardwell	_			contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$100.00	
	2802 Townes Ln Austin, TX 78703	3-1645				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Emple	oyer (See Instruction	s)
4. Date	5. Full name of contributor	Out-of-st	tate PAC _		7. Amount of	8. In-kind contribution
09/25/2014	Daniel Carl				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
	4021 Valley View Rd # B Austin,	TX 78704-6	725			
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	aut-of-si	tate PAC		7. Amount of	8. In-kind contribution
09/16/2014	Christy Carpenter				contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$100.00	·
	1408 Mesa Ridge Ln Austin, TX 7	8735-1635				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)

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### SCHEDULE A

The	Instruction Guide explains how to		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution
09/18/2014	Jeff Carpenter				contribution	description (if applicable)
	Contributor address:	City S	tate	ZIP Code	\$350.00	
	801 W 5th St Apt 2806 Austin, TX 7	78703-5464				
					(if travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)     Chairman					oyer (See Instructions cademic Works	5)
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution
07/13/2014	Jim Carpenter				contribution	description (if applicable)
	6. Contributor address:	City S	tate	ZIP Code	\$350.00	
		,	iale	ZIF Code		
	1700 Palisades Pointe Ln Austin, T>	( 78738-5351			·	
					1 ·	Texas, complete Schedule T)
	pation / Job title (See Instructions)	)			oyer (See Instruction	5)
Chief Execut	ive Officer			Ç	arpenter & Assoc	· · · · · · · · · · · · · · · · · · ·
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution
09/22/2014	Rebecca Carpenter				contribution	description (if applicable)
	6. Contributor address:	City S	tate	ZIP Code	\$100.00	
	   1407 Spyglass Dr Austin, TX 78746	-6908				
	1,70				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	I pation / Job title (See Instructions	<u> </u>		10 Emple	oyer (See Instruction	<u> </u>
	(	,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution
07/13/2014	Robin Carpenter	_			contribution	description (if applicable)
	6. Contributor address:	City S	tate	ZIP Code	\$350.00	
	1700 Palisades Pointe Ln Austin, T	X 78738-5351				
					(if travel outside o	Texas, complete Schedule T)
•	pation / Job title (See Instructions	)			oyer (See Instruction	•
Real Estate				C	arpenter & Associates,	Inc.

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## SCHEDULE A

The	Instruction Guide explains how to		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler	. <u></u>				hics Commission Filers)
4. Date	5. Full name of contributor	Out-of-si	tate PAC _		7. Amount of contribution	In-kind contribution description (if applicable)
07/01/2014	Edward Carr				\$20.00	description (ii applicable)
	6. Contributor address:	City	State	ZIP Code		
	2215 Post Rd Apt 1102 Austin, TX	78704-436	2 -			
		<del></del>			· · · · · · · · · · · · · · · · · · ·	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)				10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-st	tate PAC		7. Amount of	8. In-kind contribution
09/25/2014	William Carson				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	8707 Smoketree Cv Austin, TX 78	735-1433				• •
					(if travel outside o	Texas, complete Schedule T)
· '	pation / Job title (See Instruction	s)			oyer (See Instruction	s)
Planner					arson Planners	
4. Date	5. Full name of contributor	out-of-si	tate PAC _		7. Amount of contribution	8. In-kind contribution
09/25/2014	Shannon Casati				\$25.00	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$23.00	
	2801 Ashdale Dr Austin, TX 7875	7-8109				
-					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instruction	s)	•	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution
09/25/2014	Tony Casati			,	contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$25.00	
	2801 Ashdale Dr Austin, TX 7875	7-8109		•		
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)

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### SCHEDULE A

The	nstruction Guide explains how to comple		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor out-	f-state PAC _			7. Amount of	8. In-kind contribution
07/16/2014	Bruce Cash				contribution	description (if applicable)
	6. Contributor address: City	State	ZIP Co	ode	\$50.00	•
	1507 Newning Ave Austin, TX 78704-2534					
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)	10 E	10 Employer (See Instructions)			
4. Date	5. Full name of contributor out-	f-state PAC			7. Amount of	8. In-kind contribution
07/23/2014	Brandon Cason				contribution	description (if applicable)
	6. Contributor address: City	State	ZIP Co	ode	\$100.00	
	1805 Buffalo Speedway Leander, TX 78641			,		
					(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)		10 E	Emplo	yer (See Instruction	5)
4. Date	5. Full name of contributorout-o	of-state PAC _			7. Amount of	8. In-kind contribution
09/25/2014	C. Brian Cassidy				contribution	description (if applicable)
	6. Contributor address: City	State	ZIP Co	ode	\$350.00	
	600 Congress Ave Ste 2200 Austin, TX 787	01-3055				
					(if travel outside o	Texas, complete Schedule T)
Principal occu     Attorney	pation / Job title (See Instructions)		10 E		yer (See Instruction ocke Lord LLP	s)
4. Date	5. Full name of contributorout-c	of-state PAC _			7. Amount of	8. In-kind contribution
08/12/2014	Peter Cesaro				contribution	description (if applicable)
	6. Contributor address: City	State	ZIP Co	ode	\$25.00	
	54 Rainey St Apt 713 Austin, TX 78701-439	93				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)		10 E	Emplo	yer (See Instruction	s)

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### SCHEDULE A

The	nstruction Guide explains how to	complete	this form			Total pages Schedule A:		
2. FILER NAME						209	nics Commission Filers)	
Z. FICER NAME	Stephen Adler					3. ACCOUNT # (Ell	ilos Commissión Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC _			7. Amount of	8. In-kind contribution	
07/27/2014	Norm Chafetz					contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Co	de	\$50.00		
	11000 Rustic Manor Ln Austin, ТХ	78750-113	36					
						(if travel outside of	Texas, complete Schedule T)	
9. Principal occur	pation / Job title (See Instructions	5)		10 E		yer (See Instructions	5)	
Scorer					Pe	arson Education		
4. Date	5. Full name of contributor	out-of-s	tate PAC _				8. In-kind contribution description (if applicable)	
08/21/2014	Norm Chafetz			,		\$50.00	description (ii applicable)	
	Contributor address:	City	State	ZIP Co	de	\$30.00	-	
	11000 Rustic Manor Ln Austin, TX	78750-113	36					
						(if travel outside o	Texas, complete Schedule T)	
	pation / Job title (See Instructions	s)		10 E		yer (See Instructions	s)	
Scorer					Pe	arson Education		
4. Date	5. Full name of contributor	out-of-s	state PAC _			7. Amount of	8. In-kind contribution	
09/20/2014	Norm Chafetz					contribution \$100.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Co	ode	\$100.00		
	I 1000 Rustic Manor Ln Austin, TX	78750-113	36					
	,					(if travel outside o	Texas, complete Schedule T)	
1	pation / Job title (See Instructions	s)		10 E	· ·	yer (See Instruction	s)	
Scorer					Pe	arson Education		
4. Date	5. Full name of contributor	out-of-s	state PAC _			7. Amount of contribution	In-kind contribution description (if applicable)	
09/16/2014	Paul Chamberlain					\$100.00	description (ii applicable)	
	6. Contributor address:	City	State	ZIP Co	ode	\$100.00		
	1606 San Antonio St Austin, TX 78	3701-1223						
						(if travel outside o	Texas, complete Schedule T)	
9 Principal occup	pation / Job title (See Instructions	5)		10 E	Emplo	yer (See Instruction	s)	
1				ļ				

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## SCHEDULE A

Th	e Instruction Guide explains how to	Total pages Schedule A:     209			
2. FILER NAM	E Stephen Adler				hics Commission Filers)
4. Date 09/16/2014	Full name of contributor     Victoria Chamberlain	out-of-state PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
·	1606 San Antonio St Austin, TX 78	8701-1223		(if travel outside o	Texas, complete Schedule T)
9. Principal oc	cupation / Job title (See Instruction	10 Empl	oyer (See Instruction	s)	
4. Date 09/12/2014	<ul><li>5. Full name of contributor</li><li>Gregory Chanon</li><li>6. Contributor address:</li><li>4100 Hyridge Dr Austin, TX 78759</li></ul>	out-of-state PAC City State 9-8022	ZIP Code	7. Amount of contribution \$150.00	8. In-kind contribution description (if applicable)
9. Principal oc	cupation / Job title (See Instruction	s)	10 Empl	(if travel outside o oyer (See Instruction	Texas, complete Schedule T)
4. Date 09/16/2014	<ul><li>5. Full name of contributor</li><li>David Charney</li><li>6. Contributor address:</li><li>3702 Terrina St Apt 7 Austin, TX 2</li></ul>	City State	ZIP Code	7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)
9. Principal oc	L cupation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	Texas, complete Schedule T) s)
4. Date 09/10/2014	Full name of contributor     Tiffany Chrisman	out-of-state PAC	,	7. Amount of contribution	8. In-kind contribution description (if applicable)
	6 Contributor address: 4 Torrington Ct Austin, TX 78738	City State	ZIP Code	\$200.00 (if travel outside o	Texas, complete Schedule T)
9. Principal oc Financial	cupation / Job title (See Instruction Services	s)		oyer (See Instruction	s)

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### SCHEDULE A

The I	nstruction Guide explains how to		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
09/22/2014	Jo Anne Christian	_			contribution	description (if applicable)
,	6. Contributor address:	City	State	ZIP Code	\$75.00	
	7905 Moritz Ln Austin, TX 78731-	1468				
					(if travel outside o	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)				10 Emplo	oyer (See Instruction	s)
4. Date	5. Full name of contributor	Out-of-s	tate PAC		7. Amount of	8. In-kind contribution
08/11/2014	Joe Christie	_	-		contribution	description (if applicable)
'	6. Contributor address:	City	State	ZIP Code	\$350.00	
	900 Dawson Rd Austin, TX 78704	-1636				
	·				(if travel outside o	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)				10 Emplo	oyer (See Instruction	s)
CriticalWirel	ess Corp.			0	wner	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
08/11/2014	Tana Christie				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	900 Dawson Rd Austin, TX 78704	-1636				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	S)
Homemaker				N	one	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/09/2014	Dave Chun				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
	600 Westbrook Dr Austin, TX 787	46-5442				
	_				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)

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### **SCHEDULE A**

The I	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler		= =.				hics Commission Filers)
4. Date	5. Full name of contributor	Out-of-s	state PAC			7. Amount of	8. In-kind contribution
07/10/2014	Tim Clark	<del></del>	_			contribution	description (if applicable)
	Contributor address:	City	State	ZIP	Code	\$350.00	
	301 Congress Ave Ste 1100 Austin,	TX 78701	-2958				•
						(if travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)				1	0 Emplo	yer (See Instruction	s)
Real Estate Ir	nvestment		····································		C	ypress Real Estate Adv	isors
4. Date	5. Full name of contributor	oul-of-	state PAC _			7. Amount of contribution	In-kind contribution description (if applicable)
07/10/2014	Toni Clark					\$350.00	accompact (in applicable)
	Contributor address:	City	State	ZIP	Code	\$250.00	
	301 Congress Ave Ste 1100 Austin,	TX 78701	-2958				
						(if travel outside o	Texas, complete Schedule T)
	Principal occupation / Job title (See Instructions)			1		oyer (See Instruction	s)
None					N	one	
4. Date	5. Full name of contributor	out-of-	state PAC _			7. Amount of	8. In-kind contribution
08/21/2014	Lydia Clay					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP	Code	\$150.00	
	1608 Elmhurst Dr Austin, TX 7874	1-2510					
						(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	3)		1	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-	state PAC _			7. Amount of	8. In-kind contribution
08/05/2014	Andrew Wilson Clements					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP	Code	\$100.00	
	   4528 Ruiz St Austin, TX 78723-333	31					
						(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)		1	0 Emplo	oyer (See Instruction	1
Architect					-	exas DSHS	

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### **SCHEDULE A**

The	Instruction Guide explains how to complete the		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler	-			hics Commission Filers)	
4. Date	5. Full name of contributor out-of-state	e PAC		7. Amount of	8. In-kind contribution	
09/19/2014	Andrew Wilson Clements			contribution	description (if applicable)	
	6. Contributor address: City	State Z	IP Code	\$250.00		
	4528 Ruiz St Austin, TX 78723-3331					
	.*			(if travel outside or	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)		10 Emplo	oyer (See Instruction:	s)	
Architect			Te	exas DSHS		
4. Date	5. Full name of contributorout-of-stat	te PAC		7. Amount of	8. In-kind contribution	
07/01/2014	Rance Clouse			contribution	description (if applicable)	
	6. Contributor address: City	State Z	IP Code	\$50.00		
	   2001 S Mo Pac Expy Apt 924 Austin, TX 78746		•			
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)		10 Emplo	10 Employer (See Instructions)		
4. Date	5. Full name of contributor Out-of-state	te PAC		7. Amount of	8. In-kind contribution	
07/24/2014	Rance Clouse			contribution	description (if applicable)	
	6. Contributor address: City	State Z	IP Code	\$100.00		
	2001 S Mo Pac Expy Apt 924 Austin, TX 78746	•				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)		10 Empl	oyer (See Instruction	<u> </u>	
4. Date	Full name of contributorout-of-star	te PAC	<u> </u>	7. Amount of	8. In-kind contribution	
09/02/2014	Randy Cohen			contribution	description (if applicable)	
	6. Contributor address: City	State Z	IP Code	\$350.00		
	5912 Balcones Dr Austin, TX 78731-4310					
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)		10 Empl	oyer (See Instruction	s)	
Chief Energi	zing Officer		TicketCity			

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### SCHEDULE A

					1 Total pages Sab	adula A:	
The I	nstruction Guide explains how to	complete	this form.		Total pages Schedule A:     209		
2. FILER NAME						hics Commission Filers)	
Z. TIEEK WANTE	Stephen Adler				3. ACCOUNT#(Et	nica Commission Filera)	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
07/24/2014	Heidi Cohn	_	_		contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$45.00		
	3050 Tamarron Blvd Apt 4209 Aus	tin, TX 787	746-8019				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10 Emp					oyer (See Instruction	L	
					<u></u>		
4. Date	5. Full name of contributor	Out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
09/22/2014	Griffin Cole	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	1301 W 25th St Ste 402 Austin, TX	•	36				
	1301 W 23til 3t 3te 402 Austili, 17	. 76705-12.			//FA		
O. Deineinal conv	nation / Joh title /Con Instructions	-1		40 Fmml		Texas, complete Schedule T)	
Dentist	pation / Job title (See Instructions	·			oyer (See Instruction elf	s)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
07/15/2014	John Coleman				contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$250.00		
	10202 Echoridge Dr Austin, TX 78	750					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Empl	oyer (See Instruction	S)	
Appraiser	,			тт	he Aegis Group, Inc.		
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
08/05/2014	Gregory K Collins				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
r	2510 El Greco Cv Austin, TX 7870	3-1510					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction:	s)		10 Empl	oyer (See Instruction	s)	
Real Estate	·				Centro Development, Ll	LC	

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### SCHEDULE A

The I	nstruction Guide explains how to		Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler					3. ACCOUNT # (Eti	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-st	tate PAC			7. Amount of	8. In-kind contribution
09/01/2014	Jana Collins		_				description (if applicable)
	6. Contributor address:	City	State	ZIP (	Code	\$50.00	
	4424 Sacred Arrow Dr Austin, TX 7	8735-6362	2				
						(if travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)					10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-st	tate PAC	<del></del>		7. Amount of	8. In-kind contribution
09/17/2014	Don Collis	<u>—</u>	_			contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP (	Code	\$350.00	
	2700 Island Ledge Cv Austin, TX 7	8746-1982					
						(if travel outside o	Texas, complete Schedule T)
Principal occur     Retired	pation / Job title (See Instructions	)		10	•	oyer (See Instructions one	s)
4. Date	5. Full name of contributor	Out-of-s	tate PAC _			7. Amount of	8. In-kind contribution
09/17/2014	Margaret Collis					contribution	description (if applicable)
	Contributor address:	City	State	ZIP (	Code	\$350.00	
	2700 Island Ledge Cv Austin, TX 7	8746-1982					
						(if travel outside o	Texas, complete Schedule T)
Principal occu     Retired	pation / Job title (See Instructions	)		10	•	oyer (See Instruction one	5)
4. Date	5. Full name of contributor	out-of-s	tate PAC			7. Amount of	8. In-kind contribution
09/10/2014	Stephnie Connell					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP (	Code	\$25.00	i
	1810 Polo Rd Austin, TX 78703-31	35					
						(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	;)		10	Emplo	oyer (See Instruction	s)

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## SCHEDULE A

The	Instruction Guide explains how to	o complete	this form		Total pages Schedule A:			
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution		
09/22/2014	James M Cook				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$350.00	!		
	8201 Denali Pkwy Apt 2 Austin, T	X 78726-17	765					
					(if travel outside o	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)     Civil Engineer					10 Employer (See Instructions)  CSF Civil Group			
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution		
09/24/2014	Jeanne Cook				contribution	description (if applicable)		
	Contributor address:	City	State	ZIP Code	\$25.00			
	1815 Alta Vista Ave Austin, TX 78	3704-3152						
	, ,				(if travel outside o	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)				10 Empl	10 Employer (See Instructions)			
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution		
08/01/2014	Rowland Cook				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$250.00	. :		
	2900 Wade Ave Austin, TX 78703	-1017						
					(if travel outside o	Texas, complete Schedule T)		
Principal occi     Attorney	upation / Job title (See Instruction	s)		,	oyer (See Instruction Vinstead Law Firm	s)		
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of	8. In-kind contribution		
09/14/2014	Martha Coons				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$125.00			
	5 Niles Rd Austin, TX 78703-3147	7						
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occi	upation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)		

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## SCHEDULE A

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The	Instruction Guide explains how to	complete this for	m.	Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/14/2014	Richard Coons			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$125.00		
	5 Niles Rd Austin, TX 78703-3147				,	
	,			(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	upation / Job title (See Instructions	10 Emple	oyer (See Instruction	s)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/16/2014	Gary Cooper			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$125.00		
	4907 Bull Mountain Cv Austin, TX	78746-2402				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occi	upation / Job title (See Instructions	3)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/21/2014	Meredith Cooper			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
	3310 Three Rivers Dr Austin, TX 7	8746-1629				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occi	upation / Job title (See Instructions	5)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/22/2014	Candice Corby	<u> </u>		contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$125.00		
	1607 Pease Rd Austin, TX 78703-3	401				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occi	upation / Job title (See Instructions	3)	10 Empl	oyer (See Instruction	s)	
			•			

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### SCHEDULE A

	•							
The	Instruction Guide explains how to	complete t	this form.		Total pages Schedule A:			
2. FILER NAME					209	hics Commission Filers)		
Z. TREEKTOWNE	Stephen Adler				3. ACCOUNT # (Lt	ilica Commission Fileraj		
4. Date	5. Full name of contributor	out-of-sta	ate PAC		7. Amount of	8. In-kind contribution		
09/22/2014	Ken Corby				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$125.00			
	1607 Pease Rd Austin, TX 78703-34	101				·		
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	10 Emplo	oyer (See Instructions	s)				
4. Date	5. Full name of contributor	Out-of-sta	ate PAC	•	7. Amount of	8. In-kind contribution		
09/19/2014	Bobbie Cornelius		_		contribution	description (if applicable)		
	Contributor address:	City	State	ZIP Code	\$250.00			
	203 Lacey Ave Austin, TX 78746-4	662				•		
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	Principal occupation / Job title (See Instructions)			10 Emplo	oyer (See Instruction	s)		
Architect				Si	te Specifics			
4. Date	5. Full name of contributor	out-of-sta	ate PAC _		7. Amount of	8. In-kind contribution		
08/20/2014	Danay C Covert				contribution \$350.00	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$350.00			
	11750 Research Blvd Austin, TX 78	759-2446						
					(if travel outside o	Texas, complete Schedule T)		
1	pation / Job title (See Instructions	)		·	oyer (See Instruction	•		
Co-Owner				С	overt Buick GMC Aus	tin		
4. Date	5. Full name of contributor	out-of-sta	ate PAC _	<del> </del>	7. Amount of contribution	8. In-kind contribution description (if applicable)		
08/20/2014	Duke M Covert				\$350.00	idescription (ii applicable)		
	6. Contributor address:	City	State	ZIP Code	3550.00			
	11750 Research Blvd Austin, TX 78	3759-2446						
					(if travel outside o	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)				10 Empl	10 Employer (See Instructions)			
Co-Owner						Covert Buick GMC Austin		

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## SCHEDULE A

The	Instruction Guide explains how to	rm.	Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/20/2014	Elizabeth Covert				description (if applicable)
	6: Contributor address:	.City State	ZIP Code	\$175.00	·
	11750 Research Blvd Austin, TX 7	8759-2446			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	10 Empl	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-state PAC	;	7. Amount of	8. In-kind contribution
08/20/2014	Rox B Covert	_		contribution	description (if applicable)
,	Contributor address:	City State	zIP Code	\$175.00	
	11750 Research Blvd Austin, TX 7	8759-2446			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC	;	7. Amount of	8. In-kind contribution
09/09/2014	Casey Covington-Wrenn			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	12217 Barrel Bnd Austin, TX 7874	8-2017			
				(if travel outside o	Texas, complete Schedule T)
1	pation / Job title (See Instruction rvice Specialist	s)		oyer (See Instruction upple Inc.	s)
4. Date	5. Full name of contributor	out-of-state PAC	;	7. Amount of	8. In-kind contribution
09/10/2014	Rob Cowan	-		contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	4303 Tallowood Dr Austin, TX 78	731-1223			
,				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)

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### SCHEDULE A

The I	nstruction Guide explains how to	<del></del>	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler		·	-	3. ACCOUNT#(Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution
09/23/2014	Ann Cox	_	_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	·
	1615 Northumberland Rd Austin, T	X 78703-31	143		j	
					(if travel outside o	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)     Professor					loyer (See Instruction ACC	s)
4. Date	5. Full name of contributor	Out-of-st	tate PAC		7. Amount of	8. In-kind contribution
07/01/2014	Katharine Cox		_		contribution	description (if applicable)
0770112011		0:1	01-1-	71D O . d .	\$350.00	
	6. Contributor address:	City	State	ZIP Code		
	2304	706				
					`	Texas, complete Schedule T)
1 '	pation / Job title (See Instructions	s)			loyer (See Instruction	s)
Homemaker				1	Vone	
4. Date	5. Full name of contributor	out-of-st	late PAC		7. Amount of	8. In-kind contribution
09/25/2014	Rodney Craig				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	ĺ
	   10913 Preston Trails Dr Austin, TX	( 78747-162	26			
	l				/if traval autoido o	Toyas complete Schodule T
9 Principal occur	I pation / Job title (See Instructions	-)		10 Emp	loyer (See Instruction	Texas, complete Schedule T)
9. Frincipal occu	pation 7 300 title (See Instituctions			TO LIND	loyer (See Instruction	
4. Date	5. Full name of contributor	out-of-si	tate PAC _		7. Amount of	8. In-kind contribution
09/16/2014	Julie Crenshaw				contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$350.00	
	2510 Kenmore Ct Austin, TX 7870	3-1504				
·					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)		10 Emp	loyer (See Instruction	s)
Homemaker				1	None	

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## SCHEDULE A

The	Instruction Guide explains how to	complete	this form.	• 7	Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler					hics Commission Filers)
4. Date	5. Full name of contributor	out-of-si	tate PAC _		7. Amount of	8. In-kind contribution
09/17/2014	Debbie Crockett				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
	2305 Barton Creek Blvd Unit 44 Au	ıstin, TX 78	8735-1652		}	
					(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
09/24/2014	M.H. Jr. Crockett Jr.	_			contribution	description (if applicable)
,	6. Contributor address:	City	State	ZIP Code	\$100.00	
	PO Box 2066 Austin, TX 78768-20	66				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	tate PAC	•	7. Amount of	8. In-kind contribution
09/17/2014	Mike Crockett		_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
	2305 Barton Creek Blvd Unit 44 At	ustin, TX 78	8735-1652	!		
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	3)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/25/2014	William O. Cromwell III	<del></del>			contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
	4015 Walnut Clay Dr Austin, TX 78	8731-3934				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s) .		10 Empl	oyer (See Instruction	ns)

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## **SCHEDULE A**

The I	nstruction Guide explains how to	complete	this form			Total pages Sche 209	
2 FILED NAME							
2. FILER NAME	Stephen Adler				•	3. ACCOUNT#(Eti	nics Commission Filers)
4. Date	5. Full name of contributor	out-of-st	tate PAC			7. Amount of	8. In-kind contribution
08/28/2014	Merlyn Cross				,	contribution	description (if applicable)
	Contributor address:	City	State	ZIP	Code	\$150.00	
	2109 W 11th St Austin, TX 78703-3	801	•				
		_				(if travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)					10 Employer (See Instructions)		
4. Date	5. Full name of contributor	Out-of-st	tate PAC				8. In-kind contribution
08/29/2014	Don Crow	<del></del>	_			contribution	description (if applicable)
	Contributor address:	City	State	ZIF	Code	\$35.00	
	3115 Lakehurst Rd Spicewood, TX	78669-668	0				
						(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	)		1	10 Emplo	oyer (See Instructions	s)
4. Date	5. Full name of contributor	out-of-si	tate PAC _			7. Amount of	8. In-kind contribution
09/25/2014	Nelson Crowe					contribution	description (if applicable)
	6. Contributor address:	City	State	Z!F	Code	\$100.00	
	3207 Avenal Dr Austin, TX 78738-5	5366					
						(if travel outside of	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	)	·		10 Emplo	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	tate PAC			7. Amount of	8. In-kind contribution
09/25/2014	Mary Catherine Cryar					contribution	description (if applicable)
	Contributor address:	City	State	ZIF	Code	\$25.00	
	5011 Evans Ave # A Austin, TX 78	751-2634					
						(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	)		$\int$	10 Emplo	oyer (See Instruction	s)
				- 1			

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### **SCHEDULE A**

The	Instruction Guide explains how to		Total pages Schedule A:				
						209	
2. FILER NAME	Stephen Adler					3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tate PAC			7. Amount of	8. In-kind contribution
09/22/2014	Julia Cuba					contribution	description (if applicable)
	Contributor address:	City	State	ZIF	<sup>2</sup> Code	\$50.00	
	2010 Hamilton Ave Austin, TX 787	02-2822					
						(if travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)				-	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	tate PAC			7. Amount of	8. In-kind contribution
09/19/2014	Isabella Cunningham					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIF	Code	\$125.00	
	PO Box E Austin, TX 78713-8905						
						(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)		,	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	tate PAC _			7. Amount of	8. In-kind contribution
07/09/2014	Sandra Cunningham					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIF	Code	\$250.00	
	4005 Enclave Mesa Cir Austin, TX	78731-215	7				,
						(if travel outside o	Texas, complete Schedule T)
Principal occu     Business Exe	pation / Job title (See Instructions cutive	3)				oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	state PAC			7. Amount of	8. In-kind contribution
09/24/2014	Sandra Cunningham					contribution	description (if applicable)
	Contributor address:	City	State	ZIF	Code	\$50.00	,
	4005 Enclave Mesa Cir Austin, TX	78731-215	57				1
						(if travel outside o	Texas, complete Schedule T)
1	Principal occupation / Job title (See Instructions)					10 Employer (See Instructions)	
Business Exe	ecutive				S	elf .	

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### SCHEDULE A

The	Instruction Guide explains how to	) <u> </u>	Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler	_			3. ACCOUNT#(Ef	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC	•	7. Amount of	8. In-kind contribution	
09/09/2014	Tracy Cunningham	_			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$35.00		
: \	1807 Pasadena Dr Austin, TX 787	57-2224			:		
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Em	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	oul-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/19/2014	William H Cunningham	<u> </u>	_		contribution	description (if applicable)	
,	6. Contributor address:	City	State	ZIP Code	\$125.00	,	
	PO Box E Austin, TX 78713-8905	•					
	,				(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)					ployer (See Instruction	<u> </u>	
						- 1-1-1 · · · · · · · · · · · · · · · ·	
4. Date	.5. Full name of contributor	out-of-	state PAC		7. Amount of	8. In-kind contribution	
09/09/2014	Chris Czichos			•	contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$40.00		
	   5312 Agatha Cir Austin, TX 78724	4-6218					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Em	ployer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of	8. In-kind contribution	
07/29/2014	Robert F Dailey	<u>—</u>	-		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$250.00		
	  8200 Neely Dr Apt 259 Austin, TX	x 78759-850	64				
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)					10 Employer (See Instructions)		
Engineer `	· · · · · · · · · · · · · · · · · · ·				AT&T		

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### **SCHEDULE A**

The	The Instruction Guide explains how to complete this form.						Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler					3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	5. Full name of contributor	out-of-st	tate PAC			7. Amount of	8. In-kind contribution		
09/15/2014	Gene Dane	_	_			contribution	description (if applicable)		
1	Contributor address:	City	State	ZIF	Code	\$350.00			
	314 E Highland Mall Blvd Ste 100	Austin, TX	78752-37	29					
						(if travel outside of	Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) 10 Emplo						oyer (See Instruction:	s)		
Architect					E.	V Studio			
4. Date 09/15/2014	5. Full name of contributor	out-of-s	tale PAC _			7. Amount of contribution	In-kind contribution description (if applicable)		
09/13/2014	Kelley Dane					\$350.00			
	6. Contributor address:	City	State	ZIF	P Code				
	314 E Highland Mall Blvd Ste 100	Austin, TX	78752-37	729					
						(if travel outside o	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)     10 Emple					oyer (See Instruction	s)			
Escrow Office	er				L	and Exchange Title			
4. Date	5. Full name of contributor	out-of-s	tate PAC		,	7. Amount of	8. In-kind contribution		
09/02/2014	Mae Daniller	-	_			contribution	description (if applicable)		
	6. Contributor address:	City	State	71F	Code	\$100.00			
	2606 Woodmont Ave Austin, TX	•							
	2000 Woodillolli Ave Austili, IA	10103-3239					<u> </u>		
O. Deitaria di anni	a Kara I lah Kila (Osa lastana)	>			40 5		Texas, complete Schedule T)		
9. Principai occu	pation / Job title (See Instruction	ns) 			10 Empi	oyer (See Instruction	s)		
4. Date	5. Full name of contributor	out-of-s	tate PAC			7. Amount of	8, In-kind contribution		
09/25/2014	Lisa Danley-Herring	_	-			contribution	description (if applicable)		
	6. Contributor address:	City	State	ZII	Code	\$25.00			
	1000 E 38th St Austin, TX 78705-	1813				<u> </u>			
						(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	ıs)			10 Empl	oyer (See Instruction	s)		
9. Principal occu	L pation / Job title (See Instruction	18)			10 Empl	1	1 · · · · · · · · · · · · · · · · · · ·		

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### SCHEDULE A

The I	Instruction Guide explains how t	o complete	this form		Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler			•	3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/09/2014	Sumit DasGupta				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	·
	8900 Bluegrass Dr Austin, TX 787	759-7168				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instruction	ıs)		10 Empl	oyer (See Instruction	s)
Retired				N	ione	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
08/29/2014	Carleton Davis				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$200.00	,
	  1808 Watchhill Rd Austin, TX 78"	•				
	root waterman rearrassing the ro	, 00 2			(if travel outside o	Texas, complete Schedule T)
9. Principal occur	9. Principal occupation / Job title (See Instructions) 10 Empl					
Lawyer		,			lusch Blackwell, LLP	- <b>,</b>
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/10/2014	Darin W Davis	_	_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$150.00	
	4 Torrington Ct The Hills, TX 787	•				
	Tomington of The Times, TA 767	30-133-			/if Accord code into a	Taxaa aaaalata Cabadula T\
Q Principal occur	Lostruction / Job title (See Instruction	ie)		10 Empl	oyer (See Instruction	Texas, complete Schedule T)
Agent		15)		1	Captuity Investments	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/25/2014	Darin W Davis				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
	4 Torrington Ct The Hills, TX 787	738-1554			·	
		· .			(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	loyer (See Instruction	s)
Agent					Captuity Investments	<del></del> .

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### SCHEDULE A

The I	instruction Guide explains how t	Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler		-	,	3. ACCOUNT#(Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
07/21/2014	Stephen Davis	<del></del>			contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$250.00	
	300 Bowie St Apt 2307 Austin, Ti	X 78703-467	<b>'</b> 3		1	
					(if travel outside o	Texas, complete Schedule T)
<ol><li>Principal occuj</li></ol>	pation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	s)
Attorney					elf	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/24/2014	Stephen Davis				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
ļ	200 Congress Ave Unit 41Q Austi	n, TX 78701	1-4565			·
		,			(if travel outside o	Texas, complete Schedule T)
9. Principal occur	9. Principal occupation / Job title (See Instructions) 10 Emp					· · · · · · · · · · · · · · · · · · ·
Retired		-		N	lone	•
4. Date	5. Full name of contributor	Out-of-s	state PAC	<u> </u>	7. Amount of	8. In-kind contribution
09/08/2014	Kelly Davis-Burns	_			contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$30.00	
	322 Heartwood Dr Austin, TX 783	745-2232				
	DEE TRUIT OUR DI PRESINI, EXT. 70	, 13 2232			(if travel outside o	Texas, complete Schedule T)
9. Principal occu	I	ns)		10 Empl	oyer (See Instruction	<del></del>
	, , , , , , , , , , , , , , , , , , , ,	,_,		7.5 (2.7.4)	-,-, (	·
4. Date	5. Full name of contributor		state PAC	-	7. Amount of	8. In-kind contribution
09/10/2014	Jason Deal		-		contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$100.00	·
	3704 Laurel Ledge Lange Austin,	TX 78731				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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### **SCHEDULE A**

The	Instruction Guide explains how to	complete	this form		Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-st	tate PAC _		7. Amount of	8. In-kind contribution
09/22/2014	Michael Deane				contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$350.00	
	2414 Exposition Blvd Ste D100 Au	stin, TX 78	703-2265			
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	10 Emple	oyer (See Instruction	s)		
Builder	101		•	M	lichael Deane Homes,	lnc.
4. Date	5. Full name of contributor	out-of-si	late PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)
07/28/2014	Susan H Denn				\$350.00	
	6. Contributor address:	City	State	ZIP Code		
	3422 S Lamar Blvd Austin, TX 787	704-7931				
					(if travel outside o	Texas, complete Schedule T)
<ol><li>Principal occu</li></ol>	pation / Job title (See Instructions	10 Empl	oyer (See Instruction	s)		
Property Mar	nager			S	elf	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
07/10/2014	Perrie Dennison				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	2209 Lawnmont Ave Apt 308 Aust	in, TX 7875	56-1929			
	,				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	3)		10 Empl	oyer (See Instruction	s)
Cheesemong	er Extraordinaire			C	entral Market HEB	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution
09/13/2014	Don Denny				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
	307 N Cuernavaca Dr Apt M Austi	n, TX 7873	3-3244	*		
	ĺ				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)		10 Empl	oyer (See Instruction	s)

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### **SCHEDULE A**

The	Instruction Guide explains how to	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/19/2014	Michael Denosky			contribution	description (if applicable)
	Contributor address:	City State	ZIP Code	\$50.00	
	7303 Holly Fern Cv Austin, TX 787	50-7902	۸.		
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)	10 Emplo	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	In-kind contribution
08/27/2014	Trevor B Dickens	<del>_</del> _		contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$50.00	
:	801 W 38th St Ste 301 Austin, TX 7	•			
	oor w bour be sic sor reason, rx r	6705-1107		(if tenue) outside o	Texas, complete Schedule T)
9 Principal occur	L pation / Job title (See Instructions	١	10 Emple	oyer (See Instruction	<u> </u>
o. Timologi odda	patient dus title (oce mediacione	,	10 Empi	oyer (oce mendenen	<b>5</b> ,
4. Date	5. Full name of contributor	Out-of-state PAC		7. Amount of	8. In-kind contribution
09/23/2014	Philip Diehl	_		contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	14501 Falcon Head Blvd Unit 4 Aus	•	-;- • • • • •	,	
	14301 1 alcon ficad bivd Onit 4 Aus	Sun, 177 76736-0009		/if traval autoida a	Tayan samulata Sahadula T\
9 Principal occur	I pation / Job title (See Instructions	1	10 Empl	oyer (See Instruction	Texas, complete Schedule T)
o. Timoparocca		,	TO Empi	oyer (bee mandenom	3,
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/10/2014	Timothy Dillon	_		contribution	description (if applicable)
	Contributor address:	City State	ZIP Code	\$25.00	
	3218 Barton View Dr Austin, TX 78	3735-6901			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)	10 Empl	oyer (See Instruction	s)

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### SCHEDULE A

The	Instruction Guide explains how to	o complete	this form			Total pages Sche	
2. FILER NAME	Stephen Adler	<u> </u>	<del></del>		- (	209 3. ACCOUNT # (Etl	hics Commission Filers)
4. Date 09/18/2014	<ul><li>5. Full name of contributor</li><li>Joseph A Diquinzio Jr.</li><li>6. Contributor address:</li><li>500 W 7th St Austin, TX 78701-28</li></ul>	City	tate PAC _	ZIP Coo		contribution \$350.00	8. In-kind contribution description (if applicable)  Texas, complete Schedule T)
9. Principal occupation / Job title (See Instructions)  Owner						yer (See Instructions C Co Development	s)
4. Date 09/22/2014	<ul><li>5. Full name of contributor</li><li>Carol Dochen</li><li>6. Contributor address:</li><li>5010 N Rim Dr Austin, TX 78731-</li></ul>	City	state PAC _	ZIP Coo		7. Amount of contribution \$350.00	In-kind contribution description (if applicable)  Texas, complete Schedule T)
9. Principal occu Realtor	9. Principal occupation / Job title (See Instructions) Realtor			10 E	10 Employer (See Instructions) Self		
4. Date 08/21/2014	<ul><li>5. Full name of contributor</li><li>Luanne Dodge</li><li>6. Contributor address:</li><li>9003 Wildridge Dr Austin, TX 787</li></ul>	City	State	ZIP Cod	_	7. Amount of contribution \$150.00	In-kind contribution description (if applicable)
9. Principal occu	pation / Job title (See Instruction	s)		10 E	Emplo	yer (See Instruction	Texas, complete Schedule T) s)
4. Date 07/23/2014	5. Full name of contributor  Dustin Donnell  6. Contributor address:  2209 Greenlee Dr Austin, TX 7870	City 03-1708	State	ZIP Cod	de		In-kind contribution description (if applicable)  Texas, complete Schedule T)
Principal occu     Investor	pation / Job title (See Instruction	us)		10 E	Emplo Sel	yer (See Instruction If	s)

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### **SCHEDULE A**

The I	nstruction Guide explains how to	complete this form		Total pages Schedule A:		
		<b>-</b>		209		
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/24/2014	Rebecca Donnelly			contribution	description (if applicable)	
,	6. Contributor address:	City State	ZIP Code	\$10.00		
(	1700 W 29th St Austin, TX 78703-1	1806				
				(if travel outside or	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)	10 Empl	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Ann Downing	_		contribution	description (if applicable)	
	Contributor address:	City State	ZIP Code	\$175.00		
	11132 Shady Hollow Dr Austin, TX	78748-1830				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occuj	pation / Job title (See Instructions	5)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC	<del></del>	7. Amount of	8. In-kind contribution	
09/25/2014	Jim Downing	_		contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$175.00		
	11132 Shady Hollow Dr Austin, TX	X 78748-1830				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	3)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Tom Dreher			contribution	description (if applicable)	
	Contributor address:	City State	ZIP Code	\$100.00		
	1200 Barton Creek Blvd Apt 18 Au					
			(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	3)	10 Empl	oyer (See Instruction	s)	

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### **SCHEDULE A**

The	Instruction Guide explains how to	1.	Total pages Schedule A:		
2. FILER NAME	Stephen Adler		·	3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/21/2014	Dorothy Drummer			contribution \$150.00	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$150.00	
	1718 Cromwell Hi Austin, TX 7870	3-3307			
·				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/22/2014	Melodee DuBois			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$250.00	
	11266 Taylor Draper Ln Apt 1714 A	180		·	
				(if travel outside o	Texas, complete Schedule T)
•	pation / Job title (See Instructions	)	t .	oyer (See Instruction	s)
Chief Develo	opment Officer	· 	Z	ACH Theatre	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution	8. In-kind contribution
08/29/2014	Susan Dudley			\$250.00	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$250.00	
	2101 Schulle Ave Austin, TX 78703	3-2141 .			·
	1			(if travel outside o	Texas, complete Schedule T)
_	ipation / Job title (See Instructions	5)		oyer (See Instruction	
Sales			K	Super Sotheby's Interna	tional Realty
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution	8. In-kind contribution
08/29/2014	Karen R Dunaway			\$50.00	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$50.00	
	8147 Ceberry Dr # B Austin, TX 78	759-8738			
			•	(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instructions	5)	10 Empl	oyer (See Instruction	s)
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The	Instruction Guide explains how to	o complete	this form		Total pages Sch		
				· 	209		
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/23/2014	Kakky Dyer				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
•	3601 Murillo Cir Austin, TX 7870	3-1547					
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)					oloyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
08/28/2014	Lesley Dyer		_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$30.00		
	5721 Louise Ln Austin, TX 78757-	4418					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Em	ployer (See Instruction	s)	
						- <del>, -,</del>	
4. Date	5. Full name of contributor	out-of-s	state PAC	` '	7. Amount of	8. In-kind contribution	
09/25/2014	Dean Dzurilla		•		contribution \$100.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code			
	8414 La Plata Loop Austin, TX 78	737-3146					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Em	ployer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
08/25/2014	Eva Eakin Wisser				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	7117 Foxtree Cv Austin, TX 78750	0-7919					
				<u> </u>	(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Em	ployer (See Instruction	is)	
Attorney					Self		

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### SCHEDULE A

The	Instruction Guide explains how t	Total pages Schedule A:     209					
2. FILER NAME	Stephen Adler	-			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/20/2014	Eva Eakin Wisser	. —	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
-	7117 Foxtree Cv Austin, TX 7875	0-7919					
	,				(if travel outside o	Texas, complete Schedule T)	
Principal occu     Attorney	pation / Job title (See Instruction		loyer (See Instruction Self	s)			
4. Date	5. Full name of contributor	□out-of-s	state PAC		7. Amount of	8. In-kind contribution	
08/16/2014	Sammy Easterday		_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$20.00		
;		,	Olalo	2 0000			
	1702 Shelbourne Dr Austin, TX 78	5/32-2140					
Q Principal pec	  pation / Job title (See Instruction	ne)		10 Emp	loyer (See Instruction	Texas, complete Schedule T)	
3. Thropal occ	pation 7 300 title (oee matraction	13)		10 Emp	loyer (See mandenon	3)	
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Cami Eastman	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$25.00		
	610 W Crestland Dr Austin, TX 78	8752-1307					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	upation / Job title (See Instruction	ns)		10 Emp	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
07/08/2014	Mark Eaver				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
1	3124 Above Stratford Pl Austin, T	X 78746-46	500				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	upation / Job title (See Instruction	ns)		10 Emp	loyer (See Instruction	s)	

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### **SCHEDULE A**

The	The Instruction Guide explains how to complete this form.						Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler					3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-sta	te PAC			7. Amount of contribution	In-kind contribution  description (if applicable)	
09/24/2014	David Edelman  6. Contributor address:	City	State	ZIP	· Code	\$100.00	, , , ,	
	3834 Spicewood Springs Rd Ste 20	•		3978				
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		1	0 Emplo	oyer (See Instruction:	s)	
4. Date 09/25/2014	5. Full name of contributor	Out-of-sta	te PAC _			7. Amount of contribution	In-kind contribution description (if applicable)	
109/23/2014	Maureen Edwards  6. Contributor address:	City	State	ZIP	Code	\$150.00		
	18 Severn River Rd Severna Park, I	MD 21146-46	558					
					·	(if travel outside o	Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instructions	s)		1	IO Emplo	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-sta	te PAC			7. Amount of	8. In-kind contribution	
09/25/2014	Robert Edwards					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP	Code	\$350.00		
	18 Severn River Rd Severna Park, I	MD 21146-46	558					
						(if travel outside o	Texas, complete Schedule T)	
<ol><li>Principal occu Sales Operat</li></ol>	pation / Job title (See Instructions ions	s)		1	•	oyer (See Instruction laxoSmithKline	s)	
4. Date	5. Full name of contributor	out-of-sta	te PAC _		<del></del>	7. Amount of	8. In-kind contribution	
07/09/2014	George Elliman					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIF	Code	\$350.00		
	4411 Shoal Creek Blvd Austin, TX	78756-3212						
						(if travel outside o	Texas, complete Schedule T)	
	pation / Job title (See Instructions	s)		1	-	oyer (See Instruction	s)	
Publisher &	Principal, Tribeza				T	ribeza		

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### SCHEDULE A

The I	Instruction Guide explains how to	complete	,	Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler			•	3. ACCOUNT#(Et	hics Commission Filers)		
4. Date	5. Full name of contributor	Out-of-s	tate PAC		7. Amount of	8. In-kind contribution		
09/23/2014	Jarnes Erben	_		_	contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$350.00			
	302 Jack Nicklaus Dr Austin, TX 7	8738-1714						
					(if travel outside o	Texas, complete Schedule T)		
· · · · · · · · · · · · · · · · · · ·	Principal occupation / Job title (See Instructions)				oyer (See Instruction	s)		
President				E	rben Associates LLC			
4. Date	Full name of contributor	Out-of-s	tate PAC		7. Amount of	8. In-kind contribution		
07/29/2014	Mark Erwin				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$100.00			
	   1000 Guadalupe St Austin, TX 787	01-2328						
					(if travel outside o	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)				10 Empl	oyer (See Instruction	s)		
IT Manager				Т	Travis County Courthouse			
4. Date	5. Full name of contributor	Out-of-s	itate PAC		7. Amount of	8. In-kind contribution		
07/29/2014	Mark Erwin				contribution	description (if applicable)		
,	Contributor address:	City	State	ZIP Code	\$100.00			
	   1000 Guadalupe St Austin, TX 787	01-2328						
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occup	pation / Job title (See Instructions	s)			oyer (See Instruction			
IT Manager				Т	ravis County Courthou	se		
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution		
07/29/2014	Mark Erwin				contribution	description (if applicable)		
	Contributor address:	City	State	ZIP Code	\$100.00			
	1000 Guadalupe St Austin, TX 787	01-2328						
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	10 Empl	oyer (See Instruction					
IT Manager				Т	Travis County Courthouse			

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### **SCHEDULE A**

The	instruction Guide explains how to	o complete	this form	i.	Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-st	ate PAC	<del></del> ,	7. Amount of contribution	In-kind contribution description (if applicable)
07/29/2014	Mark Erwin  6. Contributor address:	City	State	ZIP Code	\$50.00	
	1000 Guadalupe St Austin, TX 787	701-2328				Tanana arang lata Cabadula T
9 Principal occur	nation / Joh title (See Instruction	<u> </u>	<del></del> · · ·	10 Emple	oyer (See Instruction	Texas, complete Schedule T)
					ravis County Courthou	
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)
09/25/2014	Gina Esteves				\$10.00	
	6. Contributor address:	City	State	ZIP Code	r.	
	7701 Jaborandi Dr Austin, TX 787	39-1933				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	9. Principal occupation / Job title (See Instructions) 10 Emplo					s)
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of	8. In-kind contribution
09/22/2014	Deena Estrada Salinas				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$40.00	
	2611 Ektom Dr Apt D Austin, TX	78745-2629				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-st	tate PAC		7. Amount of	8. In-kind contribution
09/09/2014	Amy Etten				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
	506 Honeycomb Rdg Austin, TX 7	78746-5327				
				·	(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)

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### SCHEDULE A

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The I	Instruction Guide explains how to	complete	this form		1. Total pages Schedule A: 209			
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution		
09/10/2014	Ted Eubanks Jr.			<u>-</u>	contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$50.00			
	2201 A Ln Austin, TX 78703-3132			"				
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occup	pation / Job title (See Instructions	)		10 Emple	10 Employer (See Instructions)			
4. Date	5. Full name of contributor	Out-of-s	tate PAC		7. Amount of	8. In-kind contribution		
09/10/2014	Virginia Eubanks		_		contribution	description (if applicable)		
0571512011	• • •	<b>0</b>	04-4-	710.0.4.	\$50.00			
	6. Contributor address:	City	State	ZIP Code				
	2201 A Ln Austin, TX 78703-3132							
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	)		10 Empl	oyer (See Instruction	s) ·		
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution		
08/13/2014	Ron Marshall Eudy		_		contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$25.00			
	1809 W 10th St Austin, TX 78703-3	•						
	1009 W 10th St Austrit, 1A 76703-3	1707						
O. Bringing Language	antina / Joh Milla (Con Jantanationa			140 5	<u> </u>	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	) 		10 Empi	oyer (See Instruction	s)		
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution		
09/04/2014	Chiquita W Eugene			· · ·	contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$50.00			
	10101 Pinehurst Dr Austin, TX 7874	47-1303						
			•		(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	)		10 Empl	oyer (See Instruction	s)		

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### SCHEDULE A

The	Instruction Guide explains how to	າ.	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date 07/09/2014	5. Full name of contributor  Vernon Evans 6. Contributor address:  11406 Toledo Dr Austin, TX 78759		ZIP Code		8. In-kind contribution description (if applicable)  Texas, complete Schedule T)	
9. Principal occu Broker	pation / Job title (See Instruction		oyer (See Instruction exas Investment Prope	"		
4. Date 09/17/2014	5. Full name of contributor  Michael Eyman  6. Contributor address:  6313 Poncha Pass Austin, TX 7874	City State	ZIP Code	7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
9. Principal occupation / Job title (See Instructions) Operations and Supply Chain   1. Operations are supply Chain				(if travel outside of Texas, complete Schedule T)  10 Employer (See Instructions)  SunPower Corporation		
4. Date 08/29/2014	<ul><li>5. Full name of contributor</li><li>Vilma Falck</li><li>6. Contributor address:</li><li>4100 Jackson Ave Apt 437 Austin,</li></ul>	City State TX 78731-6008	ZIP Code	7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	Texas, complete Schedule T) s)	
4. Date 09/25/2014	Full name of contributor     John Farr     Contributor address:     Rocky River Cv West Lake Hills	Out-of-state PAC  City State , TX 78746-5362	ZIP Code	7. Amount of contribution \$100.00	In-kind contribution description (if applicable)  Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	<u> </u>	

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#### SCHEDULE A

The	Instruction Guide explains how to	complete th	is form.		1. Total pages Schedule A: 209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state	e PAC		7. Amount of	8. In-kind contribution
09/25/2014	Kim Farr				contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$100.00	
	4 Rocky River Cv West Lake Hills,	TX 78746-53	362			
					(if travel outside of	Texas, complete Schedule T)
9. Principal occuj	pation / Job title (See Instructions	3)		10 Emplo	oyer (See Instruction:	s) .
4. Date	5. Full name of contributor	out-of-state	e PAC		7. Amount of	8. In-kind contribution
09/25/2014	Thomas Farrell				contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$350.00	
	210 Lavaca St Apt 2902 Austin, TX	X 78701-4597				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occupation / Job title (See Instructions) 10 E				10 Emplo	oyer (See Instruction	s)
Executive				В	ellicum Pharmaceutica	ls Inc
4. Date	5. Full name of contributor	out-of-stat	e PAC		7. Amount of	8. In-kind contribution
09/22/2014	Rebecca Feferman				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
	2235 E 6th St Apt 416 Austin, TX	78702-3450				
	·				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)		10 Emple	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-stat	e PAC		7. Amount of	8. In-kind contribution
08/26/2014	Derek Felderhoff				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$25.00	
	1005 W Stassney Ln Apt 104 Austi	n, TX 78745				
				•	(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction	s)
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## **SCHEDULE A**

The I	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler			<u>-</u>		3. ACCOUNT # (Eti	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-si	tate PAC _			7. Amount of	8. In-kind contribution
08/20/2014	Lionel Felix						description (if applicable)
	6. Contributor address:	City	State	ΖſΡ	Code	\$100.00	
	507 Pressler St 3108 Austin, TX 787	703-5151			,	:	4
ļ i						(if travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)				1	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	tate PAC _				8. In-kind contribution
07/01/2014	Kent Ferguson					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP	Code	\$350.00	
	98 San Jacinto Blvd Ste 1810 Austir	n, TX <i>7</i> 870	11-4237				'
						(if travel outside o	Texas, complete Schedule T)
9. Principal occup	Principal occupation / Job title (See Instructions)				0 Emplo	yer (See Instruction:	s) .
Owner					H	ealthCare Facilities De	velopment Corporation
4. Date	5. Full name of contributor	out-of-s	tate PAC			7. Amount of	8. In-kind contribution
07/01/2014	Melissa Ferguson					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP	Code	\$350.00	•
	98 San Jacinto Blvd Ste 1810 Austir	, TX 7870	1-4237				· -
				·		(if travel outside o	Texas, complete Schedule T)
Principal occur     Volunteer	pation / Job title (See Instructions	)		1		oyer (See Instruction one	s)
4. Date	5. Full name of contributor		510		,	7. Amount of	8. In-kind contribution
09/19/2014	Mark Fishman	out-or-s	tate PAC _	•		contribution	description (if applicable)
09/19/2014	6. Contributor address:	Citv	State	710	Code	\$36.00	
·	PO Box 49226 Austin, TX 78765-92		Jake	<b>~</b> 11	Jude		
	FO BOX 49220 Austrii, 1 A 78703-94	440				(if the containing of	Taylor annulate Cabady (5.7)
9 Principal occur	Lpation / Job title (See Instructions	١		14	0 Empl	oyer (See Instruction	Texas, complete Schedule T)
3. Elliopai occu	padon / 300 tide (000 matidodona	,			o Emple	i	J,

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### **SCHEDULE A**

The I	nstruction Guide explains how to	complete	this form	١,		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler						hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC			7. Amount of	8. In-kind contribution	
07/10/2014	James Flieller		_			contribution	description (if applicable)	
	Contributor address:	City	State	ZIP	Code	\$350.00		
	3129 Honey Tree Ln Austin, TX 78	746-6744						
						(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	5)		10		yer (See Instruction	•	
Attorney					Fl	ieller Kruger Skelton &	& Plyler, LLP	
4. Date	5. Full name of contributor	out-of-s	tate PAC _			7. Amount of	8. In-kind contribution	
07/10/2014	Jane Flieller					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP	Code	\$350.00		
	   3139 Honeytree lane Austin, TX 78	746-6744						
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10 Em				0 Emplo	yer (See Instruction	s)		
Accountant	<u></u>				Se	elf		
4. Date	5. Full name of contributor	Out-of-s	tate PAC _			7. Amount of	8. In-kind contribution	
09/25/2014	Ashley Floyd					contribution	description (if applicable)	
	Contributor address.	City	State	ZIP	Code	\$350.00		
	2609 Wilson St Austin, TX 78704-5	5438						
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)		1	•	oyer (See Instruction	•	
Research Ana	alyst				A	ffiliated Computer Ser	vices	
4. Date	5. Full name of contributor	out-of-s	state PAC _			7. Amount of	8. In-kind contribution	
09/25/2014	Jason Floyd					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZiP	Code	\$350.00		
	2609 Wilson St Austin, TX 78704-	5438						
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)	,	1	0 Empl	oyer (See Instruction	s)	
Owner					À	RC Incorporated		

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### SCHEDULE A

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The	Instruction Guide explains how t	Total pages Schedule A:     209					
2. FILER NAME	Stephen Adler			_	3. ACCOUNT#(Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
08/28/2014	Eric Fluhr				contribution	description (if applicable)	
	6. Contributor address.	City	State	ZIP Code	\$10.00		
	1001 Garner Ave Austin, TX 7870	4-2129					
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Empl	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
08/28/2014	Jenni Fluhr	<del>-</del> .			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$10.00		
	1001 Garner Ave Austin, TX 7870	4-2129					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occi	upation / Job title (See Instruction	ıs)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution	
07/25/2014	Dan Foster	<del>.</del>			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	1608 Alta Vista Ave Austin, TX 7	8704-3112		N.			
					(if travel outside o	Texas, complete Schedule T)	
Principal occi     Attorney	upation / Job title (See Instruction	ns)			oyer (See Instruction Vomack McClish Wall	•	
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of	8. In-kind contribution	
08/21/2014	Dorothy Foster				contribution	description (if applicable)	
·	6. Contributor address:	City	State	ZIP Code	\$100.00		
,	2005 Leberman Ln Austin, TX 78	703-2107					
_					(if travel outside o	Texas, complete Schedule T)	
9. Principal occ	upation / Job title (See Instruction	ıs)		10 Empl	oyer (See Instruction	s)	
						•	

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### SCHEDULE A

The I	nstruction Guide explains how to		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler			·	3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution
09/17/2014	Lauren Foster				contribution	description (if applicable)
	6. Contributor address:	City S	tate .	ZIP Code	\$25.00	
	811 E 11th St Austin, TX 78702-19	30				
					(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)		10 Emplo	oyer (See Instructions	s)
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution
08/11/2014	Beth Fowler				contribution	description (if applicable)
	Contributor address:	City S	tate	ZIP Code	\$350.00	
;	   1626 Enfield Rd Austin, TX 78703	-3429				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occupation / Job title (See Instructions) 10 Em				10 Emplo	oyer (See Instruction	s)
Author				Se	elf	
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution
08/25/2014	Terry Frakes				contribution	description (if applicable)
	6. Contributor address:	City S	tate .	ZIP Code	\$100.00	
	4105 Sinclair Ave Austín, TX 7875	6-3524				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	\$)		10 Emplo	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution
09/14/2014	William Franz	_			contribution	description (if applicable)
·	Contributor address:	City S	tate	ZIP Code	\$100.00	
	7312 Journeyville Dr Austin, TX 78	8735-1762				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)		10 Emple	oyer (See Instruction	s)
		<u>,                                     </u>				

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### SCHEDULE A

The	Instruction Guide explains how t	,	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
08/12/2014	Martha Frede	_	_		contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$100.00	
	4200 Jackson Ave Apt 5016 Austin	n, TX 78731	1-6061			
					(if travel outside o	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)     10 Emplo				oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Buddy Freed	_	-		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$12.50	,
	4911 Bob Cat Run Austin, TX 787	31-2607				
		2007			(if travel outside o	Texas, complete Schedule T)
9. Principal occu	9. Principal occupation / Job title (See Instructions) 10 Emp					L
4. Date	5. Full name of contributor	Out-of-s	state PAC	· · · · · · · · · · · · · · · · · · ·	7. Amount of	8. In-kind contribution
09/25/2014	Sandra Freed	_			contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$12.50	
	4911 Bob Cat Run Austin, TX 787	731-2607			1	
				•	(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Empl	oyer (See Instruction	<u> </u>
		· · · · · · · · · · · · · · · · · · ·				
4. Date	5. Full name of contributor	out-of-	state PAC _		7. Amount of	8. In-kind contribution
09/14/2014	Douglas Freeman				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	PO Box 4028 Austin, TX 78765-4	028				·
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	
Public Relati					ones-Dilworth, Inc	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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### SCHEDULE A

The I	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler	<del>-</del>					hics Commission Filers)
4. Date	5. Full name of contributor	out-of-st	tate PAC			7. Amount of	8. In-kind contribution
09/25/2014	Ken Freytag					contribution	description (if applicable)
	Contributor address:	City	State	ZIP	Code	\$200.00	
	2211 W Anderson Ln Austin, TX 7	8757-1223					
						(if travel outside o	Texas, complete Schedule T)
	pation / Job title (See Instructions	5)		1	0 Emplo	yer (See Instruction:	s)
Owner					Fr	eytag's Florist	
4. Date	5. Full name of contributor	Out-of-st	late PAC _			7. Amount of	8. In-kind contribution
09/20/2014	Joanie Frieden	•				contribution \$100.00	description (if applicable)
	6. Contributor address:	City	State	ZIP	Code	\$100,00	
	7202 Running Rope Cir Austin, TX	78731-213	3				
						(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)		1	0 Emplo	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-st	tate PAC			7. Amount of	8. In-kind contribution
09/04/2014	Harry Friedman II	_	_			contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP	Code	\$100.00	
	1311 Newning Ave Austin, TX 787	704-1840					
,		*				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)		1	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	tate PAC _		`	7. Amount of	8. In-kind contribution
09/24/2014	Karen Friese					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP	Code	\$350.00	
	1120 S Capital Of Texas Hwy City TX 78746-6711	View 2, Sui	te 100 We	est Lai	ke Hills,	(if travel outside o	f Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)		1	0 Emplo	oyer (See Instruction	
President					K	Friese & Associates, I	nc.

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### SCHEDULE A

The I	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
07/23/2014	Francisco Fuentes Jr.	<del></del>			contribution :	description (if applicable)	
,	Contributor address:	City	State	ZIP Code	\$350.00		
•	6502 Alasan Cv Austin, TX 78730	)-2717		•			
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Empl	10 Employer (See Instructions)		
Owner				F	MB Construction Com	pany	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)	
07/23/2014	Maria E Fuentes				\$350.00	description (ii applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	6502 Alasan Cv Austin, TX 78730	)-2717					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	Principal occupation / Job title (See Instructions)			10 Empl	loyer (See Instruction	s)	
Pharmacist			· -·-	V	Valgreens		
4. Date	5. Full name of contributor	aut-of-s	tate PAC		7. Amount of	8. In-kind contribution	
07/18/2014	Regan Gammon III				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	3125 Hemphill Park Austin, TX 7	8705-2822					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ns)		10 Emp	loyer (See Instruction	s)	
Vice Presider	nt			F	Cimberlin Family Partne	ership	
4. Date	5. Full name of contributor	Out-of-s	state PAC	ı	7. Amount of	8. In-kind contribution	
07/18/2014	William B. Gammon				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	3125 Hemphill Park Austin, TX 7	8705-2822					
,					(if travel outside o	Texas, complete Schedule T)	
<ol><li>Principal occu</li></ol>	pation / Job title (See Instruction	ns)		10 Emp	loyer (See Instruction	s)	
Insurance				'	William Gammon Insur	ance	

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### SCHEDULE A

' The	Instruction Guide explains how to	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler			3. ACCOUNT#(Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/24/2014	Sushma Gandhi			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$50.00	
	1408 S 3rd St Austin, TX 78704-23	308			•
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instructions	s)	10 Emp	loyer (See Instruction	s) 
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Sushma Gandhi			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$50.00	
	1408 S 3rd St Austin, TX 78704-23	•			
	. 100 5 210 577143811, 171 7070 1 20			(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instructions	s)	10 Emp	loyer (See Instruction	
		, 		, , , , , , , , , , , , , , , , , , ,	,
4. Date	5. Full name of contributor	out-of-state PAC	-	7. Amount of	8. In-kind contribution
08/14/2014	Andy Garbe		1	contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	[211 Blair Way Austin TX Austin,	TX 78704-5571			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instruction	s)	10 Emp	loyer (See Instruction	s)
Attorney			(	Garbe Law Firm, PLLC	
4. Date	Full name of contributor	ut-of-state PAC		7. Amount of	8. In-kind contribution
09/22/2014	Andy Garbe			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	·
	1211 Blair Way Austin TX Austin.	TX 78704-5571			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instruction	s)	10 Emp	loyer (See Instruction	s)
Attorney				Garbe Law Firm, PLLC	

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### SCHEDULE A

The I	The Instruction Guide explains how to complete this form.					edule A:		
2. FILER NAME	Stephen Adler	· · ·	<del></del>	····-	3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution		
09/10/2014	Ruth Gardner-Loew	_	_		contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$25.00			
	1301 Bonham Ter Austin, TX 7870	4-2606						
					(if travel outside of	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)				10 Empk	10 Employer (See Instructions)			
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution		
09/02/2014	Melissa Garza		_		contribution	description (if applicable)		
, i	Contributor address:	City	State	ZIP Code	\$350.00			
		•	Olaic	Zii Çodç		•		
	9605 Prescott Dr Austin, TX 78749	-5203						
0.00				10 = 1	1	Texas, complete Schedule T)		
9. Principal occuj Homemaker	pation / Job title (See Instructions	;) 			10 Employer (See Instructions) None			
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution		
09/02/2014	Rudy Garza				contribution	description (if applicable)		
	Contributor address:	City	State	ZIP Code	\$350.00			
	9605 Prescott Dr Austin, TX 78749	-5203				'		
	2003 7 10000 B1 7 100 III, 171 707 13	3203			/if travel outside o	f Texas, complete Schedule T)		
9 Principal occur	Ioation / Job title (See Instructions	:)		10 Emple	oyer (See Instruction	<u> </u>		
President		′1			arzaBury	<b>-</b> ,		
4. Date	5. Full name of contributor	Dout-of-s	state PAC		7. Amount of	8. In-kind contribution		
09/24/2014	Brian Gaston		_	<del>.</del> .	contribution	description (if applicable)		
	Contributor address:	City	State	ZIP Code	\$75.00			
	PO Box 10085 Austin, TX 78766-1	085				·		
	,				(if travel outside o	Texas, complete Schedule T)		
9. Principal occur	pation / Job title (See Instructions	s)	<del></del>	10 Empl	oyer (See Instruction	<u> </u>		
	•	•		'				

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### **SCHEDULE A**

The I	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler					3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC	-		7. Amount of	8. In-kind contribution	
09/12/2014	Terrell Gates	_	_			contribution	description (if applicable)	
·	6. Contributor address:	City	State	ZIP	Code	\$350.00		
	4812 Timberline Dr Rollingwood,	TX 78746-5	5631					
						(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	oation / Job title (See Instruction	s)		1	0 Emplo	oyer (See Instruction	s)	
Private Equity	y Real Estate Investor				V	irtus Real Estate Capita	al	
4. Date	5. Full name of contributor	out-of-s	state PAC			7. Amount of	8. In-kind contribution	
09/24/2014	Michael Gaudini	— ,	_			contribution	description (if applicable)	
	Contributor address:	City	State	7IP	Code	\$25.00		
		•			0000			
	1905 Nucces St Apt 310 Austin, T.	A /8/U3-33	38					
		<u> </u>		1.			Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instruction	·s)		1	0 Emplo	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	Out-of-s	state PAC			7. Amount of	8. In-kind contribution	
07/01/2014	Belinda Gayle					contribution	description (if applicable)	
	Contributor address:	City	State	ZIP	Code	\$350.00	,	
`	1609 Scenic Dr Austin, TX 78703	-2054					•	
1						(if travel outside o	Texas, complete Schedule T)	
9. Principal occuj Homemaker	pation / Job title (See Instruction	is)		1	-	0 Employer (See Instructions) None		
4. Date	5. Full name of contributor	Out-of-s	state PAC			7. Amount of	8. In-kind contribution	
07/01/2014	DeWitt Gayle		-			contribution	description (if applicable)	
	Contributor address:	City	State	ZiP	Code	\$350.00		
	1609 Scenic Dr Austin, TX 78703	-2054				ļ		
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	9. Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)						l	
Architect					S	TG Design, Inc.		

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The	Instruction Guide explains how t	Total pages Schedule A:     209					
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers) .	
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/09/2014	Erin Gentry				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$10.00		
	1200 Barton Hills Dr Apt 273 Aus	tin, TX 7870	04-1954				
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Empl	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/15/2014	Ashwin Ghatalia				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$175.00		
	6202 Cape Coral Dr Austin, TX 78	8746-7215					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	oul-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/15/2014	Bhanu Ghatalia				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$175.00		
	6202 Cape Coral Dr Austin, TX 78	8746-7215					
					(if travel outside o	Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instruction	is)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	Out-of-:	state PAC		7. Amount of	8. In-kind contribution	
08/14/2014	Hubert Gill				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	1707 Palma Plz Austin, TX 78703	-3987					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	s)	

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The	Instruction Guide explains how to	complete	this form		Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
07/15/2014	Charles Girard	_			contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$250.00	
	300 Bowie St Apt 1704 Austin, TX	78703-461	4			
					(if travel outside o	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)     10 Emplo					oyer (See Instruction	•
Director, Go	vernment Relations			Н	ospital Corporation of	America
4. Date	Full name of contributor.	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution
09/24/2014	John Glade				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$250.00	
	18 Saint Stephens School Rd Austi	n, TX 7874	6-3119		:	
		-			(if travel outside o	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)				10 Empl	oyer (See Instruction	s)
Investment E	Banker			C	learview Trading Advi	sors
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
08/04/2014	Dave Glassco				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	2001 Travis Heights Blvd Austin,	ΓX 78704-3	640			
	_				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)
Investor				S	elf	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/10/2014	Jaime Goggans			•	contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
i	3804 Tonkawa Trl # B Austin, TX	78756-391	6			
:					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	Principal occupation / Job title (See Instructions)				oyer (See Instruction	s)

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### SCHEDULE A

The	nstruction Guide explains how to	o complete	this form	١.	, -	Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/22/2014	Cindy Goldsberry	_			contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$350.00		
	12407 Brushy Holw Austin, TX 78	37 <b>50</b> -110 <b>1</b>				·	
		÷			(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)     10 Emplo					loyer (See Instruction	s)	
Business Acc	eleration and Sales Consulting			7	ZFactor Group		
4. Date	5. Full name of contributor	out-of-	state PAC _		7. Amount of	8. In-kind contribution	
09/23/2014	Dean Goodnight				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$300.00		
	10220 Pinehurst Dr Austin, TX 78	747-1111					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10 Emplo					loyer (See Instruction		
Realtor		-,			Goodnight Properties	-,	
4. Date	5. Full name of contributor	Out-of-	state PAC	-	7. Amount of	8. In-kind contribution	
09/ <b>20/2</b> 014	Mark Goodrich		_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00	·	
	8028 Jester Blvd Austin, TX 78750	,				,	
	10026 Jester Diva Austri, TA 76750				/if traval autaida a	Texas, complete Schedule T)	
9 Principal occu	lpation / Job title (See Instruction	e)		10 Emp	loyer (See Instruction		
Retired	·			I .	None	<b>-</b> /	
4. Date	5. Full name of contributor	□out-of-	state PAC	•	7. Amount of	8. In-kind contribution	
09/20/2014	Suzanne Goodrich				contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$350.00		
}	  8028 Jester Blvd Austin, TX 78750	0-7827			*		
		<i>i</i>			(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	9. Principal occupation / Job title (See Instructions) 10 Emplo					s)	
Retired				1	None		

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### SCHEDULE A

	<del> </del>						
The	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution	
09/22/2014	Toye Goodson				contribution	description (if applicable)	
·	6. Contributor address:	City	State	ZIP Code	\$100.00		
	9205 Stallion Dr Austin, TX 78733	-3224					
		1			(if travel outside of	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Empk	oyer (Sée Instruction:	s) `	
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution	
09/01/2014	Prabhakar Gopalan	_	_		contribution	description (if applicable)	
	6. Contributor address:	City .	State	ZIP Code	\$350.00		
	915 W Milton St Austin, TX 78704	<b>⊢3454</b>					
	``				(if travel outside o	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10 8				10 Emple	oyer (See Instruction	l	
Chief Execut	ive Officer			W	Whole Mind Consulting LLC		
4. Date	5. Full name of contributor	Out-of-st	tate PAC		7. Amount of	8. In-kind contribution	
09/24/2014	Rex Gore				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00	-	
	1304 W Oltorf St Austin, TX 7870	4-5333					
	,				(if travel outside o	  Texas, complete Schedule T)	
	pation / Job title (See Instructions	s)			oyer (See Instruction	s)	
President				P.	JS of Texas, Inc		
4. Date	5. Full name of contributor	out-of-st	tate PAC _		7. Amount of contribution	In-kind contribution description (if applicable)	
09/17/2014	Richard Gorelick				\$175.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$175.00	·	
	4502 Eby Ln Austin, TX 78731-45	28					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empi	oyer (See Instruction	s)	

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The	Instruction Guide explains how t	ı.	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/17/2014	Virginia Gorelick		_		contribution	description (if applicable)
,	Contributor address:	City	State	ZIP Code	\$175.00	
	4502 Eby Ln Austin, TX 78731-45	528				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	is)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	Out-of-	state PAC		7. Amount of	8. In-kind contribution
08/24/2014	Delwin Goss	_	_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
		•	01010			
	6410 Ponca St Austin, TX 78741-7	2473				To a consider Octobril (5.7)
O. Principal conu	pation / Job title (See Instruction	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		10 Empl	oyer (See Instruction	Texas, complete Schedule T)
Retired	padon) sob tide (See instituction	15)			lone	3)
4. Date	5. Full name of contributor	Out-of-	state PAC	· · · · · · · · · · · · · · · · · · ·	7. Amount of	8. In-kind contribution
08/03/2014	Brian Graham-Moore		_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
		,	Oldic	211 0000		
	1817 E 40th St Austin, TX 78722-	1337				
0. Dissipat	- time / Ind. title /One Instruction			40. 51	`	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	15)		10 Empi	oyer (See Instruction	5)
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of	8. In-kind contribution
09/24/2014	Allen Green	_	-		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
	5811 Highland Pass Austin, TX 78	3731-4060				,
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	s)

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### SCHEDULE A

	· · · · · · · · · · · · · · · · · · ·					
The I	nstruction Guide explains how to o	omplete this form.		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				hics Commission Filers)	
4. Date	Full name of contributor	out-of-state PAC _		7. Amount of	8. In-kind contribution	
09/13/2014	Colby Green				description (if applicable)	
	Contributor address:	City State	ZIP Code	\$25.00		
	307 King Elder Ln Leander, TX 7864	1-1739	1			
				(if travel outside of	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)		10 Empl	mployer (See Instructions)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/14/2014	Wade Green				description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
	1712 Lakeshore Dr Ste B Austin, TX	78746-3714			•	
	,			(if travel outside of	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/29/2014	Wade Green			contribution	description (if applicable)	
	Contributor address:	City State	ZIP Code	\$88.00		
	1712 Lakeshore Dr Ste B Austin, TX	78746-3714				
	·			(if travel outside o	Texas, complete Schedule Ţ)	
9. Principal occu	pation / Job title (See Instructions)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/04/2014	Betsy Greenberg			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
,	3009 Washington Sq Austin, TX 7870	)5-2217				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)		10 Empl	oyer (See Instruction	s)	
[·					•	

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## SCHEDULE A

The I	Instruction Guide explains how to	complete	this form		Total pages Schedule A:		
2. FILER NAME	Stephen Adler		<del> </del>		3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
07/28/2014	John Greening		_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	6900 Ligustrum Cv Austin, TX 787.	50-8352					
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Emp	oloyer (See Instruction	s)	
Management	Consultant				AccelaVue		
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of contribution	8. In-kind contribution	
07/10/2014	Tyler Gregory				\$3.00	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$3.00	_	
	3902 College Main St Apt 315 Brya	ın, TX 7780	01-3829				
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Em	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/10/2014	Evan Gremont				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00	,	
	7700 Rustling Rd Austin, TX 7873	-1336					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu Realtor	pation / Job title (See Instructions	)		10 Emp	10 Employer (See Instructions)  Carol Dochen Realtors, Inc.		
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/16/2014	Michael Griffin				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$200.00		
	1504 Travis Heights Blvd Austin, T	X 78704-3	120		,		
1					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)		10 Em	oloyer (See Instruction	s)	
Marketing	Marketing				, Adlucent		

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### SCHEDULE A

The	Instruction Guide explains how t	o complete	this form	ı.	-	Total pages Schedule A:	
		•				209 3. ACCOUNT # (Ethics Commission Filers)	
2. FILER NAME	Stephen Adler					3. ACCOUNT # (Eti	nics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tate PAC _			7. Amount of	8. In-kind contribution
09/22/2014	Karen E. Gross					i	description (if applicable)
	6. Contributor address:	City	State	ZIP C	ode	\$100.00	
	2015 Riverview St Austin, TX 787	02-5528					
						(if travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)				10	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	tate PAC			7. Amount of	8. In-kind contribution
09/24/2014	Ann Guerra					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP C	Code	\$175.00	
	2107 Key West Cv Austin, TX 78	746-7257				<b>.</b>	
						(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ıs)		10	Emplo	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	state PAC _			7. Amount of	8. In-kind contribution
09/24/2014	Rick Guerra					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP C	Code	\$175.00	1
	2107 Key West Cv Austin, TX 78	746-7257		ï			
						(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	is)	·	10	Emplo	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	state PAC			7. Amount of	8. In-kind contribution
09/16/2014	Hannah Guidry					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP C	Code	\$350.00	
1	13000 Fitzhugh Rd Austin, TX 78	736-6535					
						(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)		10	10 Employer (See Instructions)		
Homemaker	!				None		

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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### **SCHEDULE A**

	•					
The	Instruction Guide explains how to	complete this form	n.	` -	Total pages Schedule A:	
-					209	
2. FILER NAME	Stephen Adler			3. ACCOUNT#(Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/16/2014	Tyler Guidry			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$350.00		
	13000 Fitzhugh Rd Austin, TX 787	36-6535				
, 				(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)     10 Em				ployer (See Instruction	s)	
Partner				Modifly	•	
4 Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Bill D. Gump			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$350.00		
	9008 Sautelle Ln Austin, TX 78749	D-1146				
			•	(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)	10 Em	ployer (See Instruction	s)	
Broker				Tower Commercial, Inc.		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/18/2014	Rosa Gutierrez Mendoza			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$350.00		
	3412 Green Emerald Ter Austin, T.	X 78739-7615	1			
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	3)	10 Em	ployer (See Instruction	s)	
Certified Pul	olic Accountant			R. Mendoza & Compan	y, P.C.	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/21/2014	Randy Guzinsky			contribution \$350.00	description (if applicable)	
	6. Contributor address:	City State	ZIP Code			
	1200 Barton Hills Dr Apt 153 Aust	in, TX 78704		·		
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)	10 Em	ployer (See Instruction	s)	
Sales				Cintas		

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### **SCHEDULE A**

The	Instruction Guide explains how to		Total pages Schedule A:			
		- complete triis ioiiii	•	209		
2. FILER NAME	Stephen Adler			3. ACCOUNT#(Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
07/02/2014	Eduardo Hagert			contribution	description (if applicable)	
, ,	6. Contributor address:	City State	ZIP Code	\$25.00		
	2141 Independence Dr Austin, TX	78745-2082				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	upation / Job title (See Instructions	s)	10 Empl	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-state PAC _		7. Amount of	8. In-kind contribution	
09/25/2014	Jeff Hahn	•		contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$350.00		
	6700 Hot Springs Dr Austin, TX 78	8749-4003	•	,		
				(if travel outside o	Texas, complete Schedule T)	
l '	upation / Job title (See Instructions	s)		oyer (See Instruction	s)	
Public Relat	cions		T	exHahn Media Inc.		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/02/2014	Steven R Hake			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
	12702 Foxhound Cv Austin, TX 78	3729-7235				
	· .		•	(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	upation / Job title (See Instruction	s)	10 Empl	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/20/2014	Collecn Halbrook			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$116.68		
	PO Box 17142 Austin, TX 78760-7	7142				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occi	upation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)	

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### **SCHEDULE A**

The I	nstruction Guide explains how t	o complete	this form		, -	Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC	-	7. Amount of	8. In-kind contribution	
09/23/2014	Jennifer M Haley		<del>.</del>		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00	·	
<u>.</u>	1817 Chalk Rock Cv Austin, TX 7	8735-1733					
,			-		(if travel outside o	Texas, complete Schedule T)	
9. Principal occup  Consultant					loyer (See Instruction Self	s)	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/25/2014	Jennifer M Haley				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$250.00		
	1817 Chalk Rock Cv Austin, TX 7	8735-1733			•		
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup  Consultant					loyer (See Instruction Self	S)	
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/09/2014	Kelly C Hall				contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$350.00		
	6505 Lost Cv Austin, TX 78746-7	128			ŧ		
					(if travel outside o	Texas, complete Schedule T)	
Principal occul     Realtor	pation / Job title (See Instruction	ns)	•		loyer (See Instruction	•	
	T				Furnquist Partners Real	1	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)	
09/09/2014	Peter Hall				\$350.00	accomplian (ii applicatio)	
:	6. Contributor address:	City	State	ZIP Code	1		
	6505 Lost Cv Austin, TX 78746-7	128	1				
			) 		(if travel outside o	Texas, complete Schedule T)	
	pation / Job title (See Instruction	ns)		1	loyer (See Instruction	ns)	
Professor					UT Austin		

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### SCHEDULE A

The	nstruction Guide explains how to complete this fo	rm'.	,	Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributorout-of-state PAC			7. Amount of	8. In-kind contribution	
09/25/2014	William C Hamilton			contribution	description (if applicable)	
	6. Contributor address: City State	z ZI	P Code	\$100.00		
	1306 Garden St Austin, TX 78702-5349					
				(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions)		10 Employer (See Instructions)			
4. Date	5. Full name of contributor out-of-state PAC	:	-	7. Amount of	8. In-kind contribution	
09/22/2014	Lauren Hammonds			contribution	description (if applicable)	
	6. Contributor address: City State	e ZI	P Code	\$25.00		
	1908 W 36th St Austin, TX 78731-6011					
	·			(if travel outside o	Texas, complete Schedule T)	
9. Principal occur	pation / Job title (See Instructions)	,	10 Emplo	oyer (See Instruction	s)	
4. Date	Full name of contributorout-of-state PAG	;		7. Amount of	8. In-kind contribution	
07/01/2014	Rebecca Hanai			contribution	description (if applicable)	
	6. Contributor address: City State	· ZI	P Code	\$5.00		
`	   2500 Rio Grande St Austin, TX 78705-4524					
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)		10 Employer (See Instructions)			
4. Date	Full name of contributor	;		7. Amount of	8. In-kind contribution	
08/25/2014	Kelle Hand			contribution	description (if applicable)	
	6. Contributor address: City State	e Z	P Code	\$100.00		
	8546 Adirondack Trl Apt 10 Austin, TX 78759-7906				·	
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)		10 Empl	oyer (See Instruction	s)	

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## SCHEDULE A

The I	nstruction Guide explains how to	complete	this form		Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
09/19/2014	Benjamin Hanson				1	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	2211 Sunny Slope Dr Austin, TX 78	8703-1726				
					(if travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)				1	oyer (See Instruction:	s) ·
President	•			Н	arden Healthcare	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of contribution	In-kind contribution description (if applicable)
09/19/2014	Kristen H. Hanson				\$350.00	description (ii applicable)
	Contributor address:	City	State	ZIP Code	3330.00	
	221 Sunny Slope Dr. Austin, TX 7	8703				
					(if travel outside o	Texas, complete Schedule T)
, ,	pation / Job title (See Instructions	3)		1	oyer (See Instruction	s)
Homemaker				N	one	
4. Date	Full name of contributor	out-of-s	state PAC _		7. Amount of contribution	In-kind contribution description (if applicable)
09/25/2014	Katie Hanus				\$100.00	description (il applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
1	5661 Oak Blvd Austin, TX 78735-8	3712				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	\$)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/10/2014	Cynthia Harkness	_			contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$100.00	
	3505 Windsor Rd Austin, TX 7870	3-1506				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occur	pation / Job title (See Instructions	3)		10 Empl	oyer (See Instruction	s)
					<u> </u>	•

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### **SCHEDULE A**

The I	instruction Guide explains how to	Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
09/20/2014	Frank Harren					description (if applicable)
·	6. Contributor address:	City	State	ZIP Code	\$100.00	
	360 Nueces St Apt 1118 Austin, TX	78701-41	98			
					(if travel outside of	Texas, complete Schedule T)
9. Principal occupation / Job title (See Instructions) 10 E					oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
09/17/2014	Heather Harris				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
	4807 Craig Dr Austin, TX 78727-67	724				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/16/2014	Richard Hartgrove				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$125.00	
	4907 Bull Mountain Cv Austin, TX	78746-240	02			
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	3)		10 Empl	oyer (See Instruction	5)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
08/21/2014	Michael Hartman				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$300.00	
	7809 Lazy Ln Austin, TX 78757					
					(if travel outside o	Texas, complete Schedule T)
	pation / Job title (See Instructions	s)		10 Empl	oyer (See Instruction	s)
Chief Execut	ive Officer			A	my's Ice Creams	

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### **SCHEDULE A**

The I	nstruction Guide explains how to	complete	this form	1.		Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler	_					hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	state PAC			7. Amount of	8. In-kind contribution
07/08/2014	Frank Hartmann	_					description (if applicable)
	6. Contributor address:	City	State	ZIP C	ode	\$100.00	
	1503 Northwood Rd Austin, TX 787	03-1943					
						(if travel outside of	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions)	)		10	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	state PAC			7. Amount of	8. In-kind contribution
09/11/2014	Anne Harutunian					contribution	description (if applicable)
,	Contributor address:	City	State	ZIP C	ode	\$350.00	
	PO Box W Austin, TX 78713-8923						
						(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions)	)		10	Emplo	yer (See Instruction	s)
Sales Executi	ve			·	н	arutunian Engineering	
4. Date	5. Full name of contributor	Out-of-s	state PAC _			7. Amount of	8. In-kind contribution
09/11/2014	Kegham A Harutunian					contribution	description (if applicable)
	Contributor address:	City	State	ZIP C	Code	\$350.00	·
	PO Box W Austin, TX 78713-8923			•			
						(if travel outside o	   Texas, complete Schedule T)
Principal occup     Engineer	pation / Job title (See Instructions	)		10	•	oyer (See Instruction arutunian Engineering	s)
4. Date	5. Full name of contributor	out-of-s	state PAC			7. Amount of	8. In-kind contribution
09/11/2014	Shant Harutunian	_	_			contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP C	Code	\$350.00	
	PO Box W Austin, TX 78713-8923						,
						(if travel outside o	Texas, complete Schedule T)
	pation / Job title (See Instructions	)		10	•	oyer (See Instruction	
Owner					Н	arutunian Engineering	

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### SCHEDULE A

The	Instruction Guide explains how to	complete	this form		Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	state PAC _		7 Amount of contribution	8. In-kind contribution
09/11/2014	Takoohy Harutunian		·		\$100.00	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
	PO Box W Austin, TX 78713-8923					·
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instructions	)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	state PAC _	· · · · ·	7. Amount of	8. In-kind contribution
09/11/2014	Vigain Harutunian				contribution	description (if applicable)
,	6. Contributor address:	City	State	ZIP Code	\$350.00	
	PO Box W Austin, TX 78713-8923		V			
'					(if travel outside o	Texas, complete Schedule T)
*	upation / Job title (See Instructions	)		· I	oyer (See Instruction	s)
Engineer				H	larutunian Engineering	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
08/28/2014	Pat Hazell				contribution \$30.00	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$30.00	·
	2301 S Mopac Expq, Apt 1128 Aus	tin, TX 78	746			
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of	8. In-kind contribution
07/29/2014	Verna Hazlewood				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
	4159 Steck Ave Unit 147 Austin, TX 78759-8517					
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instructions	i)		10 Empl	oyer (See Instruction	s)

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## SCHEDULE A

					1 Total pages Scho	adula A:	
The I	nstruction Guide explains how to	complete this for	m.		Total pages Schedule A:     209		
2. FILER NAME	·			<del></del>	3. ACCOUNT # (Ethics Commission Filers)		
	Stephen Adler				0. 7.0000117 # (20	mas commission ( nors)	
4. Date	5. Full name of contributor	out-of-state PAC			7. Amount of	8. In-kind contribution	
07/21/2014	Becky Head	_			contribution	description (if applicable)	
	Contributor address:	City State	ZIP	Code	\$350.00		
,	7502 Downridge Dr Austin, TX 787	31-1106				1	
	- -				(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	0 Emplo	oyer (See Instructions	, , , , , , , , , , , , , , , , , , , ,			
Administrator	· · · · · · · · · · · · · · · · · · ·		İ	•	orrison & Head		
4. Date	5. Full name of contributor	Out-of-state PAC			7. Amount of	8. In-kind contribution	
09/17/2014	Rebecca Heiser					description (if applicable)	
05/17/2014		0.4	710	· O	\$250.00		
	Contributor address:	City State	ZIP	Code			
	901 S Mo Pac Expy Bldg Austin, TX	X 78746-5776					
		<u></u>				Texas, complete Schedule T)	
9. Principal occup	Principal occupation / Job title (See Instructions)				oyer (See Instruction:	·	
Agent	<u> </u>			K	uper Sotheby's International Realty		
4. Date	Full name of contributor	out-of-state PAC			7. Amount of	8. In-kind contribution	
09/17/2014	Robert Heiser				contribution	description (if applicable)	
	Contributor address:	City State	ZIP	Code	\$250.00		
	901 S Mo Pac Expy Bldg Austin, T2	X 78746-5776				,	
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)	1	I0 Emplo	oyer (See Instruction	s)	
Architect				Н	eiser Development Co	rp.	
4. Date	5. Full name of contributor	out-of-state PAC			7. Amount of	8. In-kind contribution	
07/01/2014	Melissa Henderson	_			contribution	description (if applicable)	
	Contributor address:	City State	ZIF	Code	\$25.00		
	14600 Gold Fish Ave. Austin, TX 7	8728					
	,				(if travel outside o	Texas, complete Schedule T)	
9. Principal occuj	pation / Job title (See Instructions	)		10 Emple	oyer (See Instruction	<u> </u>	

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### **SCHEDULE A**

The	nstruction Guide explains how to o	complete	this form.		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution	
07/21/2014	Glenn Henry	_		· - · · · ·	contribution	description (if applicable)	
-	Contributor address:	City	State	ZIP Code	\$350.00		
	411 Lake Cliff Trl Austin, TX 78746	-4681			·		
					(if travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)     1					oyer (See Instruction:	s)	
President	<u> </u>			,C	entaur Technology		
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution	
09/23/2014	Nadine Herbst				contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$100.00	·	
	2905 Meandering River Ct Austin, T	X 78746			1		
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)	ı		10 Emplo	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution	
09/19/2014	Paula Herd		_		contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$350.00		
	4662 Rockeliff Rd Austin, TX 78746	5-1232					
				•	(if travel outside o	Texas, complete Schedule T)	
	pation / Job title (See Instructions)	1			oyer (See Instruction	s)	
Accounting N	Manager			Н	emisphere	<del></del>	
4. Date	5. Full name of contributor	out-of-st	tate PAC		7. Amount of	8. In-kind contribution	
07/29/2014	Jordan Herman				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$150.00	· ·	
	80 Red River St Apt 209 Austin, TX	78701-423	32				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)	1		10 Empl	oyer (See Instruction	s)	

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### SCHEDULE A

The Instruction Guide explains how to complete this form.					, -	Total pages Schedule A:     209	
2. FILER NAMI	E Stepheπ Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
08/10/2014	Laura N Hernandez				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$5.00		
	2408 Manor Rd 108 Austin, TX 78	722-2042					
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Emp	10 Employer (See Instructions)		
4 Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Mario Herrera	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$15.00		
	7200 Easy Wind Dr Unit 1029 Aus	tin, TX 787	752-0003				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occ	cupation / Job title (See Instructions	s)	·	10 Emp	loyer (See Instruction	s)	
4. Date	Full name of contributor.	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Will Herring				contribution	description (if applicable)	
•	6. Contributor address:	City	State	ZIP Code	\$25.00		
	1000 E 38th St Austin, TX 78705-1	1813					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occ	cupation / Job title (See Instructions	s)		10 Emp	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/20/2014	Diane Herrington				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$250.00		
	6509 Burnet Ln Austin, TX 78757-	2835					
					(if travel outside o	Texas, complete Schedule T)	
· ·	cupation / Job title (See Instruction	s)	_		loyer (See Instruction	s)	
Retired				1	None		

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### SCHEDULE A

The	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
09/20/2014	Ronald Herrington				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$250.00		
	6509 Burnet Ln Austin, TX 78757-	2835					
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)     Retired					ployer (See Instruction None	s)	
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution	
08/06/2014	J. Felipe Heston				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	2307 Fortune Dr Austin, TX 78704	-3237					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Em	oloyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
08/06/2014	Rebecca Heston				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	2307 Fortune Dr Austin, TX 78704	-3237					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Em	oloyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
07/16/2014	Donna Stockton Hicks	<del></del> -			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	1703 W 5th St Ste 800 Austin, TX	78703-489	3				
	'				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Em	ployer (See Instruction	s)	
Interior Desi	gn ·				Donna Stockton Hicks I	Design	

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### **SCHEDULE A**

The	Instruction Guide explains how to	Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler			•	3. ACCOUNT#(Eti	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state F	PAC			8. In-kind contribution
07/16/2014	Robert S Hicks					description (if applicable)
	6. Contributor address:	City St	ate Z	IP Code	\$350.00	
	1703 W 5th St Ste 800 Austin, TX 7	8703-4893			•	
•				•	(if travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)					oyer (See Instructions	s) '
Chairman				C	apstar Partners	
4. Date	5. Full name of contributor	out-of-state F	PAC		. ,	8. In-kind contribution
09/25/2014	Brian H Higgins					description (if applicable)
•	Contributor address:	City St	ate Z	IP Code	\$125.00	
	1612 Menteer Dr Cedar Park, TX 78	3613-5809				
	:				(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)		10 Emple	oyer (See Instructions	s)
4. Date	5. Full name of contributor	out-of-state i	PAC		7. Amount of	8. In-kind contribution
09/25/2014	Kathleen M Higgins				contribution	description (if applicable)
	Contributor address:	City St	ate Z	IP Code	\$125.00	
	1612 Menteer Dr Cedar Park, TX 78	8613-5809				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)		10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution
09/19/2014	Lee Higgins				contribution	description (if applicable)
	Contributor address:	City St	tate Z	IP Code	\$100.00	
	7403 Mifflin Kenedy Ter Austin, T	X 78749-1845				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)		10 Emple	oyer (See Instruction	s)

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### **SCHEDULE A**

The	Instruction Guide explains how t		1. Total pages Schedule A: 209				
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-sta	ate PAC _		7. Amount of	8. In-kind contribution	
09/16/2014	Paul Hilgers				contribution	description (if applicable)	
-	6. Contributor address:	City	State	ZIP Code	\$100.00		
;	2804 W Fresco Dr Austin, TX 787	31-5022					
I		6			(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	is) `		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-sta	ate PAC _		7. Amount of	8. In-kind contribution	
08/16/2014	Forest Hill				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	4100 Jackson Ave Apt 311 Austin	. TX 78731-6	052			·	
		,			(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)					oyer (See Instruction	· · · · · · · · · · · · · · · · · · ·	
	<u> </u>					·	
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution	
08/21/2014	Patricia Hirsh				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	2806 Wade Ave Austin, TX 78703	3-1015					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	0 Employer (See Instructions)		
4. Date	5. Full name of contributor	<u> </u>			7. Amount of	8. In-kind contribution	
	· ·	out-of-st	ate PAC _		contribution	description (if applicable)	
09/22/2014	Deborah Hiser				\$350.00		
	6. Contributor address:	City	State	ZIP Code			
	5321 Western Hills Dr Austin, TX	78731-4852					
					<u> </u>	Texas, complete Schedule T)	
· ·	pation / Job title (See Instruction	is)			oyer (See Instruction	s)	
Attorney				ŀ	Iusch Blackwell		

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### SCHEDULE A

The I	nstruction Guide explains how to		Total pages Schedule A:				
		Somblete	3110 101111	•	209		
2. FILER NAME	Stephen Adler	_			3. ACCOUNT # (Eti	hics Commission Filers)	
4. Date	Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
08/14/2014	Jesse Otto Hite				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$125.00		
	311 Ridgewood Rd Austin, TX 7874	<b>1</b> 6-4618					
					(if travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Emplo	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
07/09/2014	Julia Stielow Hix		_		contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$50.00	)	
	805 Chrissys Cv Austin, TX 78733-	3208				. ,	
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)		10 Emplo	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
07/09/2014	Terry J Hix				contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$50.00		
	805 Chrissys Cv Austin, TX 78733-	3208			;-		
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
08/20/2014	Nestor Ho	_			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	2804 Regents Park Austin, TX 7874	6-7655					
,					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	.)		· .	oyer (See Instruction	•	
Attorney				S	ilicon Laboratories Inc		

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## SCHEDULE A

The	The Instruction Guide explains how to complete this form.				Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
07/01/2014	Jason Hoelter			contribution	description (if applicable)	
	6. Contributor address:	City State	ZiP Code	\$25.00		
!	1514 Parker Ln Apt 208 Austin, TX	X 78741-2564				
				(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/21/2014	Kurt Hoff			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$250.00	:	
	2100 Parkway Austin, TX 78703-3	149				
*				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction		
SVP Sales			S	ilicon Labs		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/21/2014	Lauri Hoff		*	contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$250.00	. '	
	2100 Parkway Austin, TX 78703-3	149				
,	·			(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)	
None	<u> </u>		N	lone	<del></del>	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/29/2014	Josh Holden			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
	1611 W 5th St Apt 313 Austin, TX	78703-4879				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)	

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## SCHEDULE A

·		· · <u>- · · · · · · · · · · · · · · · · ·</u>	· · · · · · · · · · · · · · · · · · ·			
The	Instruction Guide explains how to	o complete this form	ı <b>.</b>	Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler	<u>-</u>		3. ACCOUNT # (Ethics Commission Filers)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/21/2014	John Hollister			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
	2406 Bowman Ave Austin, TX 78	703-2312				
				(if travel outside of	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
07/10/2014	Paul Holubec			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
	3318 Bowman Ave Austin, TX 78	703-1526		•		
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/10/2014	David Honeycutt	·		contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$350.00		
	401 Congress Ave Ste 1600 Austin	n, TX 78701-3755				
				(if travel outside o	Texas, complete Schedule T)	
Principal occu     Chief Execut	pation / Job title (See Instruction	s)	•	oyer (See Instruction cxas American Resour		
	5. Full name of contributor		· · · · · · · ·		8. In-kind contribution	
4. Date		out-of-state PAC		7. Amount of contribution	description (if applicable)	
07/23/2014	Darian Honigsfeld	City Chata	ZID Code	\$100.00		
	6. Contributor address:	City State	ZIP Code			
	3307 Cherry Ln Austin, TX 78703	-2/17		(if trough autoids =	f Toyon complete Schodule T	
9 Principal occur	pation / Job title (See Instruction	ie)	10 Empl	oyer (See Instruction	f Texas, complete Schedule T)	
o. Trinoipai oodu	passer roop and took mondellon	,	, o Linp	5,51 (555 misa dollon	o,	

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## SCHEDULE A

The I	nstruction Guide explains how to	m.	Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler	<del></del>			hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/25/2014	Melinda Horan	_		contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$50.00	
	1208 W 39th 1/2 St Austin, TX 787	56-3904	•		
				(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC	•	7. Amount of	8. In-kind contribution
09/24/2014	James E Horne			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	7343 Valburn Dr. Austin, TX 7873				
16	7343 Valoum Di Nusun, 174 7073			(if travel outside o	f Texas, complete Schedule T)
9. Principal occur	Lpation / Job title (See Instructions		10 Empl	oyer (See Instruction	<u> </u>
Builder			N	4HI, Inc.	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/22/2014	John Horton			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	3111 Westlake Dr Austin, TX 7874	6-1915		·	
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	10 Empl	oyer (See Instruction	s)
Real Estate	<u> </u>		S	elf	<u>-</u>
4. Date	5. Full name of contributor	out-of-state PAC	/	7. Amount of	8. In-kind contribution
09/24/2014	John Horton		•	contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	3111 Westlake Dr Austin, TX 7874	6-1915			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	10 Emp	loyer (See Instruction	s)
Real Estate			S	ielf	

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## SCHEDULE A

The I	instruction Guide explains how to	complete	this form			Total pages Schedule A:		
						209		
2. FILER NAME	Stephen Adler					3. ACCOUNT # (Eti	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC			7. Amount of	8. In-kind contribution	
09/16/2014	Russ Horton					contribution	description (if applicable)	
	Contributor address:	City	State	ZII	Code	\$350.00		
	1702 Yaupon Valley Rd West Lake	Hills, TX	78746-343	l		,		
						(if travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)     10 Employ					yer (See Instruction:	s)		
Attorney					G	eorge, Brothers, Kinca	id & Horton, LLP	
4. Date	5. Full name of contributor	out-of-s	state PAC			,	8. In-kind contribution	
09/16/2014	Shelly Horton						description (if applicable)	
	6. Contributor address:	City	State	ZII	⊃ Code	\$350.00	Λ	
-	   1702 Yaupon Valley Rd West Lake	Hills, TX	78746-343	1				
						(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	s) .			10 Emplo	oyer (See Instructions	9)	
Homemaker	<u></u>				. N	one	·	
4. Date	,5. Full name of contributor	out-of-s	state PAC _			7. Amount of	8. In-kind contribution	
07/24/2014	Jeffrey M Horwitz				-	contribution	description (if applicable)	
	6. Contributor address:	City	State	ZII	P Code	\$350.00		
	7302 Lamplight Ln Austin, TX 787	31-2122					·	
						(if travel outside o	Texas, complete Schedule T)	
	pation / Job title (See Instructions	5)		İ		oyer (See Instruction	s)	
Doctor					D	ell Children's Hospital		
4. Date	5. Full name of contributor	out-of-s	state PAC _			7. Amount of contribution	8. In-kind contribution	
07/24/2014	Treva Horwitz					\$350.00	description (if applicable)	
	6. Contributor address:	City	State	ZII	P Code	\$330.00		
	7302 Lamplight Ln Austin, TX 787	731-2122						
						(if travel outside o	Texas, complete Schedule T)	
	pation / Job title (See Instruction	s)				oyer (See Instruction	s)	
Homemaker Nor					one			

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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## SCHEDULE A

The I	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-sta	ate PAC _		7. Amount of	8. In-kind contribution	
09/09/2014	Omar Hossain	_	. –		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
	1219 S Lamar Blvd Apt 530 Austin	TX 78704-	2178			. `	
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Em	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-sta	ate PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Todd Hotz	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
		•		2 0000		,	
	6111 Highland Hills Dr Austin, TX	. 78731-4101					
O. Dringing Language	antiam / Jah Aikla / Can Jacks atian			40.5		Texas, complete Schedule T)	
9. Findparoccu	pation / Job title (See Instructions	S)		10 Em	ployer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of	8. In-kind contribution	
09/24/2014	Diane W Howard				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	, \$150.00	1	
	3704 Meadowbank Dr Austin, TX	78703-10 <b>2</b> 6		-		·	
	Difference volume Difference, 17	10703 1020			(if traval autaida a	• Toyon nomplete Schodule T)	
9 Principal occur	 pation / Job title (See Instructions	s)		10 Em	ployer (See Instruction	Texas, complete Schedule T)	
o. Timoparooo		<del>-</del> ,					
4. Date	5. Full name of contributor	_ out-of-st	ate PAC _		7. Amount of	8. In-kind contribution	
09/04/2014	Joseph D Hughes				contribution	description (if applicable)	
	6. Contributor address:	City -	State	ZIP Code	\$100.00		
	2715 Barton Skwy Austin, TX 7876	04-4646					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Em	ployer (See Instruction	<u> </u>	
	· 					•	

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## SCHEDULE A

The I	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler			••		3. ACCOUNT#(Et	hics Commission Filers)
4. Date	5. Full name of contributor	Out-of-s	tate PAC _			7. Amount of	8. In-kind contribution
08/21/2014	Paula S Hundley					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP	Code	\$100.00	`
	3409 Taylors Dr Austin, TX 78703	-1047					
			`			(if travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)			1	10 Employer (See Instructions)			
4. Date	5. Full name of contributor	Out-of-s	tate PAC			7. Amount of	8. In-kind contribution
09/24/2014	Kenneth Hunter		_			contribution	description (if applicable)
	Contributor address:	City	State	ZIP	Code	\$100.00	
1	4 Sugar Creek Dr West Lake Hills,	TX 78746-:	5533				
						(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		1	0 Emplo	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	tate PAC			7. Amount of	8. In-kind contribution
09/24/2014	Victoria Hunter				*	contribution	description (if applicable)
1	6. Contributor address:	City	State	ZIP	Code	\$100.00	
	4 Sugar Creek Dr West Lake Hills.	, TX 78746-	5533			,	
						(if travel outside o	Texas, complete Schedule T)
<ol> <li>Principal occu Manager</li> </ol>	pation / Job title (See Instruction	s)		1	•	oyer (See Instruction tryker	5)
4. Date	5. Full name of contributor	out-of-s	tate PAC _			7. Amount of	8. In-kind contribution
09/24/2014	Victoria Hunter					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP	Code	\$100.00	
	4 Sugar Creek Dr West Lake Hills	, TX 78746-	5533				
				_		(if travel outside o	Texas, complete Schedule T)
•	pation / Job title (See Instruction	s)		1	-	oyer (See Instruction	s)
Manager					S	tryker	

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## **SCHEDULE A**

The	Instruction Guide explains how to	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/17/2014	Teresa Hurley			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	655 Cortona Dr West Lake Hills, T	`X 78746-4408			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)
Homemaker		·	N	one	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/17/2014	William Hurley			contribution	description (if applicable)
·	6. Contributor address:	City State	ZIP Code	\$350.00	
	655 Cortona Dr West Lake Hills, T	X 78746-4408			
				, (if travel outside o	Texas, complete Schedule T)
<ol><li>Principal occu</li></ol>	pation / Job title (See Instruction	s)		oyer (See Instruction	s)
Co-Founder			C	haotic Moon	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/20/2014	Debra Hurt			contribution	description (if applicable)
	6. Contributor address:	City State	ZiP Code	\$350.00	
	8424 Calera Dr Austin, TX 78735-	1568			
`				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	ipation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)
Owner	<u></u> .			ebra Hurt Interior Desi	ign
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/22/2014	Muna Hussaini			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	5719 Penny Creek Drive Austin, T	X 78759-4814			
	·		<u> </u>	(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)

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## **SCHEDULE A**

The	nstruction Guide explains how to complete	· -	Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributorout-of-st	ate PAC _		7. Amount of	8. In-kind contribution
07/07/2014	Betty Hwang			contribution	description (if applicable)
	6. Contributor address: City	State	ZIP Code	\$200.00	
	11721 Shadestone Ter Austin, TX 78732-2461		•		
	•	-		(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)	ployer (See Instruction	s)		
Board of Tru	stees			Austin Community Coll	ege
4. Date	5. Full name of contributorout-of-st	ate PAC _		7. Amount of	8. In-kind contribution
08/25/2014	Debbie Immel			contribution	description (if applicable)
	6. Contributor address: City	State	ZIP Code	\$100.00	
	6903 Treaty Oak Cir Austin, TX 78749-2336	•			
			-	(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)		10 Em	oloyer (See Instruction	s)
4. Date	5. Full name of contributor out-of-st	late PAC		7. Amount of	8. In-kind contribution
09/21/2014	Marianne Inman			contribution	description (if applicable)
	6. Contributor address: City	State	ZIP Code	\$50.00	
	2506 Enfield Rd Apt B Austin, TX 78703-3853	3			
	,			(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)		10 Em	oloyer (See Instruction	s)
4. Date	5. Full name of contributorout-of-si	tate PAC _		7. Amount of	8. In-kind contribution
09/21/2014	Tom Inman			contribution	description (if applicable)
	6. Contributor address: City	State	ZIP Code	\$50.00	
	2506 Enfield Rd Austin, TX 78703-3832				
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)		10 Em	ployer (See Instruction	s)

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## SCHEDULE A

						1. Total pages Sche	adule A:	
The I	nstruction Guide explains how to	complete	this form			· =	209	
2. FILER NAME	<del></del>					ACCOUNT # (Ethics Commission Filers)		
2. ITELK WAVIL	Stephen Adler					3. ACCOONT # (Lt	nics Constitusion Fliers)	
4. Date	5. Full name of contributor	out-of-st	tale DAC			7. Amount of	8. In-kind contribution	
08/01/2014	Diane D. Ireson						description (if applicable)	
06/01/2014	Diane D. treson					\$250.00		
	Contributor address:	City	State	ZII	P Code		, i	
	2900 Wade Ave Austin, TX 78703-	1017						
						(if travel outside of	Texas, complete Schedule T)	
9. Principal occur	pation / Job title (See Instructions	)			10 Emplo	oyer (See Instructions	s)	
Clinical Socia	· · · · · · · · · · · · · · · · · · ·					elf	•	
4. Date	5. Full name of contributor	Dout of a	tate PAC			7. Amount of	8. In-kind contribution	
		lout-bi-si	Iale PAC _			contribution	description (if applicable)	
07/18/2014	Terry Irion					\$350.00		
	Contributor address:	City	State	ZII	P Code			
	301 N Weston Ln Austin, TX 78733	-4212					•	
						(if travel outside of	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10 Emplo				oyer (See Instruction:	s)			
Attorney					Se	elf		
4. Date	5. Full name of contributor	Out-of-s	tate PAC			7. Amount of	8. In-kind contribution	
09/05/2014	Michael Irwin		_			contribution	description (if applicable)	
05/05/2014		<b></b>	<b>.</b>			\$200.00		
	6. Contributor address:	City	State	Zi	P Code			
	12404 Turtleback Ln Austin, TX 78	<b>727-524</b> 3				1		
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occuj	pation / Job title (See Instructions	)			10 Emplo	oyer (See Instruction	s)	
Wealth Advis	sor				F	rost Bank	•	
4. Date	5. Full name of contributor	Out-of-s	tate PAC			7. Amount of	8. In-kind contribution	
07/01/2014	Terry Irwin		_			contribution	description (if applicable)	
07/01/2014	1		<b>.</b>	<b>-</b> .		\$350.00		
	6. Contributor address:	City	State	Z۱	P Code		`	
	PO Box 300759 Austin, TX 78703-0	0013				1		
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)			10 Emple	oyer (See Instruction	s)	
Student				-	В	rackenridge Hospital		

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## SCHEDULE A

The !	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT#(Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of	8. In-kind contribution	
09/03/2014	Lea Isgur			,	contribution	description (if applicable)	
•	Contributor address:	City	State	ZIP Code	\$25.00		
	1504 Madison Ave Austin, TX 787:	57-1811					
					(if travel outside of	Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions	;)		10 Emplo	oyer (See Instruction:	5)	
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution	
09/15/2014	Rashed Islam	_			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	11901 Palisades Pkwy Austin, TX 7	78732-1242					
	·				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Emplo	oyer (See Instruction:	s)	
Vice Presider	nt			Н	DR Engineering		
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of	8. In-kind contribution	
09/08/2014	Zack Jamail				contribution	description (if applicable)	
·	6. Contributor address:	City	State	ZIP Code	\$100.00		
	54 Rainey St Apt 717 Austin, TX 78	8701-4393					
					(if travel outside o	Texas, complete Schedule <b>T</b> )	
9. Principal occu	pation / Job title (See Instructions	3)		10 Emplo	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-st	tate PAC _		7. Amount of	8. In-kind contribution	
09/25/2014	Laurie Janss				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
	1405 Cullen Ave Austin, TX 78757	-2526					
	,				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Empl	oyer (See Instruction	s)	

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## **SCHEDULE A**

Th	ne Instruction Guide explains how t	1.		Total pages Schedule A:     209	
2. FILER NAM	1E Stephen Adler	·····			thics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/23/2014	Kenneth M. Jastrow	_		contribution	description (if applicable)
 	6. Contributor address:	City State	ZIP Code	\$175.00	
	6 Treemont Dr Austin, TX 78746-	5595			
				(if travel outside o	Texas, complete Schedule T)
9. Principal oc	ccupation / Job title (See Instruction	is)	10 Emple	oyer (See Instruction	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/23/2014	Susan Jastrow			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$175.00	
	6 Treemont Dr Austin, TX 78746-	5595			, i
				(if travel outside o	   Texas, complete Schedule T)
9. Principal oc	ecupation / Job title (See Instruction	is)	10 Empl	oyer (See Instruction	IS)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/12/2014	Ryder Jeanes	_		contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	2629 W 45th St Ste 1030 Austin,	ΓX 78731-5941			
		•		(if travel outside o	Texas, complete Schedule T)
9. Principal oc	ocupation / Job title (See Instruction	is)	10 Empl	oyer (See Instruction	is)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/17/2014	Joseph Jenkins			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$200.00	.'
	4201 Zuni Dr Austin, TX 78759-4	•		·	
				(if travel outside o	Texas, complete Schedule T)
9. Principal oc	ocupation / Job title (See Instruction	ns)	10 Empl	loyer (See Instruction	is)
Project M	anager			CH2MHILL	

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## **SCHEDULE A**

					Total pages Schedule A:		
The	Instruction Guide explains how to	complete this	form.		209		
2. FILER NAME	Stephen Adler			-	3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state F	PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Connie Jobe					description (if applicable)	
	6. Contributor address:	City St	ate Z	IP Code	\$100.00	·	
-	410 Lake Cliff Trl Austin, TX 7874	6-4680					
				•	(if travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Employer (See Instructions)			
4. Date	5. Full name of contributor	out-of-state i	PAC		7. Amount of	8. In-kind contribution	
07/29/2014	Kermit Johns				contribution	description (if applicable)	
	6. Contributor address:	City St	ate Z	IP Code	\$350.00		
	3013 Fontana Dr Austin, TX 78704	-6329					
,					(if travel outside o	Texas, complete Schedule T)	
9. Principal occ	upation / Job title (See Instructions	5)		10 Emplo	oyer (See Instruction	s)	
Financial A	dviser			W	orthPointe/		
4. Date	5. Full name of contributor	out-of-state I	PAC		7. Amount of	8. In-kind contribution	
09/24/2014	Greg Johnson				contribution	description (if applicable)	
	6. Contributor address:	City St	tate Z	IP Code	\$100.00		
	906 Bouldin Ave Austin, TX 78704	<b>L</b> 1614				)	
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occ	upation / Job title (See Instructions	3)		10 Emplo	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution	
09/24/2014	David Johnston				contribution	description (if applicable)	
	6. Contributor address:	City S	tate Z	IP Code	\$350.00		
	116 Birnam Wood Ct Austin, TX 7	8746-4500					
	:				(if travel outside o	Texas, complete Schedule T)	
9. Principal occ	upation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	
Homemake	Homemaker				None		

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## SCHEDULE A

The	nstruction Guide explains how to complete		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributorout-of-st	late PAC _		7. Amount of	8. In-kind contribution
09/25/2014	Aurora Jones			contribution	description (if applicable)
	6. Contributor address: City	State	ZIP Code	\$25.00	·
	1015 E Yager Ln Unit 191 Austin, TX 78753-7	7044			
				(if travel outside of	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions)		10 Emplo	oyer (See Instruction:	s)
4. Date	5. Full name of contributor out-of-si	tate PAC		7. Amount of	8. In-kind contribution
09/22/2014	Brent Jones	_		contribution	description (if applicable)
	6. Contributor address: City	State	ZIP Code	\$350.00	
	400 Talkeetna Ln Cedar Park, TX 78613-2527				*
				(if travel outside o	Texas, complete Schedule T)
į.	pation / Job title (See Instructions)		1	oyer (See Instruction	s)
Owner			Ja	idco Development	
4. Date	5. Full name of contributorout-of-s	tate PAC _		7. Amount of	8. In-kind contribution
09/22/2014	Candyce R Jones			contribution	description (if applicable)
	6. Contributor address: City	State	ZIP Code	\$25.00	
	300 Bowie St Apt 3802 Austin, TX 78703-468	6			
	<u> </u>			(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions)		10 Emplo	oyer (See Instruction	5)
4. Date	5. Full name of contributorout-of-s	tate PAC		7. Amount of	8. In-kind contribution
09/22/2014	Jeffrey D Jones			contribution	description (if applicable)
	6. Contributor address: City	State	ZIP Code	\$25.00	
	300 Bowie St Apt 3802 Austin, TX 78703-468	6			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions)		10 Emple	oyer (See Instruction	s)

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## **SCHEDULE A**

The	Instruction Guide explains how to	o complete	this form.		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	Out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
08/27/2014	Meagan Jones				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00	·	
	800 W 5th St Apt 1005 Austin, TX	78703-544	4				
					(if travel outside o	Texas, complete Schedule T)	
· ·	pation / Job title (See Instruction	s)		I	oyer (See Instruction		
Executive				N	IcCoy's Building Suppl	У.	
4. Date	Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
09/22/2014	MaryLee Jonkers				contribution \$100.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	5902 Overlook Dr Austin, TX 787.	31-4222					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
08/01/2014	Ana Jordan				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	1916 Wimberly Ln Austin, TX 787	735-1566					
					(if travel outside o	Texas, complete Schedule T)	
Principal occu     Attorney	pation / Job title (See Instruction	s)		1 .	Employer (See Instructions) None		
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
08/01/2014	Sean Jordan				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	18 Treemont Dr Austin, TX 78746	-5596					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		1	oyer (See Instruction		
Attorney				S	utherland, Asbill and E	Brennan	

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## SCHEDULE A

		_				
The	Instruction Guide explains how to		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler					hics Commission Filers)
4. Date	5. Full name of contributor	out-of-sta	ate PAC		7. Amount of	8. In-kind contribution
09/10/2014	Julia Joseph		_			description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$25.00	
	7803 Monona Ave Austin, TX 787	17-5360				
					(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Emplo	oyer (See Instruction:	5)
4. Date	5. Full name of contributor	out-of-sta	ate PAC		7. Amount of	8. In-kind contribution
08/21/2014	Mildred Joseph				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	. \$100.00	,
-	2511 Bridle Path Austin, TX 78703	3-3211				
					(if travel outside of	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instruction	s)		10 Emplo	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-sta	ate PAC _		7. Amount of	8. In-kind contribution
09/10/2014	Anand Joshi				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$75.00	
	3310 Cherry Ln Austin, TX 78703	-2718				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-sta	ate PAC		7. Amount of	8. In-kind contribution
09/02/2014	Ben Joyce				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
	  2107 Barton Pkwy Austin, TX 78704-3257					
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)

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## **SCHEDULE A**

The I	Instruction Guide explains how to		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution
07/24/2014	Emily A Jung				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	·
	401 Congress Ave Ste 2100 Austin.	, TX 78701	-3798			·
					(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)		10 Emplo	oyer (See Instruction	5)
4. Date	5. Full name of contributor	out-of-s	state PAC _			8. In-kind contribution
09/23/2014	Carol Kadison	_			contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	8127 Chalk Knoll Dr Austin, TX 78	3735-1707	•		*.	
					(if travel outside o	Texas, complete Schedule T)
9. Principal occul	pation / Job title (See Instructions	5)	<del>,</del> .	i ·	oyer (See Instruction:	s)
4. Date	5. Full name of contributor	Out of s	state PAC		7. Amount of	8. In-kind contribution
09/23/2014	Carol Kallendorf		LAISTAC _		contribution	description (if applicable)
05/25/2011	Contributor address:	City	State	ZIP Code	\$350.00	
		•	State	ZIF COUG		
	1704 Briar St Austin, TX 78704-34	-22				
9 Principal occur	 pation / Job title (See Instructions	<del></del>	<u>.</u>	10 Emple	oyer (See Instruction	Texas, complete Schedule T)
Consultant	Salidity ood tille (dee mandellons	*) 			elta Associates, Inc.	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
07/15/2014	Andrea Kalmans				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
	6408 Williams Ridge Way Austin,	TX 78731-:	2700			
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)		10 Emple	oyer (See Instruction	s)
						•

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## **SCHEDULE A**

The I	nstruction Guide explains how to	complete	this form.		Total pages Schedule A:	
		•			209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tale PAC		7. Amount of	8. In-kind contribution
07/18/2014	Mark Kapner				contribution \$350.00	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$330.00	
!	4303 Wildridge Cir Austin, TX 787.	59				
					(if travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)     10 Emplo					oyer (See Instruction:	s)
Engineer				So	elf	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/17/2014	Dennis Karbach			٠	contribution \$350.00	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$330.00	
	3208 Greenlee Dr Austin, TX 78703	3-1622				
)	<u> </u>				(if travel outside o	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)				10 Emple	oyer (See Instruction	s)
IT Consultan	t			K	arbach Consulting	•
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/15/2014	Shamim Karowadia				contribution \$350.00	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$330.00	
<b> </b>	312 Latitude Ln Austin, TX 78717-	4958				
					(if travel outside o	Texas, complete Schedule T)
1	pation / Job title (See Instructions	5)			oyer (See Instruction	s)
Director	<u>-</u> .			S	sk Family	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/15/2014	Sharif S Karowadia				contribution \$350.00	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$550.00	
	312 Latitude Ln Austin, TX,78717-	4958				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	<b>i</b> )		10 Empl	oyer (See Instruction	s)
Owner				H	fillside Grocery Inc.	

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## **SCHEDULE A**

The	Instruction Guide explains how to co	<del></del>	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler					hics Commission Filers)
4. Date 09/24/2014	George Kasee	out-of-state PA		P Code	7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)
Principal occur	pation / Job title (See Instructions)			10 Emplo	(if travel outside of open (See Instructions	Texas, complete Schedule T)
Business Dev	/elopment			Se	elf ,	
4. Date 09/10/2014	Michael L Kasper	out-of-state PA		P Code	7. Amount of contribution \$250.00	8. In-kind contribution description (if applicable)
Principal occul     Physician	4002 Balcones Dr Austin, TX 78731-5 pation / Job title (See Instructions)	702		•	(if travel outside of oyer (See Instructions exas Oncology	Texas, complete Schedule T)
4. Date 09/25/2014	Joel Katz	out-of-state PA  City Stat  TX 78735-89	ite ZI	P Code	7. Amount of	8. In-kind contribution description (if applicable)
9. Principal occu	pation / Job title (See Instructions)			10 Emplo	(if travel outside of oyer (See Instructions	Texas, complete Schedule T)
4. Date 09/25/2014	5. Full name of contributor Lisa Kaufman	out-of-state PA	4C		7. Amount of contribution \$350.00	In-kind contribution description (if applicable)
	6. Contributor address: 6508 Mesa Dr Austin, TX 78731-2704	City Sta	te ZI	P Code		↑Texas, complete Schedule T)
Principal occu     Attorney	pation / Job title (See Instructions)			l '	oyer (See Instruction Davis Kaufman PLLC	s)

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## **SCHEDULE A**

The	Instruction Guide explains how t		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler			<i>,</i>	3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Robert Kay	_			contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$250.00	
•	1608 Gaston Ave Austin, TX 7870	3-2421	٠			
					(if travel outside o	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)     10 Empl					oyer (See Instruction	s)
Investments				<u> </u>	elf	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)
09/25/2014	Susan Kay				\$350.00	description (ii applicable)
	6. Contributor address:	City	State	ZIP Code	\$330.00	
	1608 Gaston Ave Austin, TX 7870	3-2421		•		
					(if travel outside o	f Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Empl	oyer (See Instruction	s)
None				N	one	
4. Date	Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
08/21/2014	Kevin Kaylakie				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	***
	   9817 Morgan Creek Dr Austin, TX	C 78717-398	35		•	
					(if travel outside o	f Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	S)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution	8. In-kind contribution
07/01/2014	Lindsey Kehlmann				\$3.00	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$5.00	, ,
	2500 Rio Grande St Austin, TX 78	3705-4524			•	
1					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Empl	oyer (See Instruction	·

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## SCHEDULE A

The I	Instruction Guide explains how to	o complete th	is form.		Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler	-			3. ACCOUNT#(Eti	nics Commission Filers)
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution
09/22/2014	Amy Keith				contribution	description (if applicable)
	Contributor address:	City S	State	ZIP Code	\$100.00	·
	907 W Annie St Austin, TX 78704	-4107				
					(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Emplo	oyer (See Instructions	5)
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution
07/01/2014	Lauren Kelleher					description (if applicable)
	6. Contributor address:	City 5	State	ZIP Code	\$350.00	
	PO Box 300759 Austin, TX 78703	-0013				,
					(if travel outside o	Texas, complete Schedule T)
<ol><li>Principal occup</li></ol>	pation / Job title (See Instruction	s)	14	10 Emplo	oyer (See Instruction:	s) .
Marketing Di	irector	· <u>-</u>		S	an Luis Spirits	
4. Date	5. Full name of contributor	out-of-state	PAC _		7. Amount of	8. In-kind contribution
09/24/2014	Mary Keller				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
	2100 Exposition Blvd Austin, TX	78703-2839				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occur	pation / Job title (See Instruction	s)		10 Emple	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state	e PAC _		7. Amount of	8. In-kind contribution
09/25/2014	Joseph Kelly				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	411 Brazos St Apt 209 Austin, TX 78701-3635					
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)
Executive			•	l Ir	nfochimps	

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## SCHEDULE A

					<del></del>
The I	Instruction Guide explains how to	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/29/2014	Burke Kennedy	_		contribution	description (if applicable)
	Contributor address:	City State	ZIP Code	\$100.00	
	1600 Barton Springs Rd Unit 6310	Austin, TX 78704-13	293		·
		~		(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	3)	10 Emplo	oyer (See Instructions	s)
4. Date	5. Full name of contributor	out-of-state PAC	<u></u>	7. Amount of	8. In-kind contribution
07/24/2014	Patrick Kennedy			contribution	description (if applicable)
	Contributor address:	City State	ZIP Code	\$350.00	•
		•	211 0000		
	1500 S Lamar Blvd 1044 Austin, T	X 78704-2940			
O. Defendant and	antina / Jala Killa / Dan Jankarakina		40 Found		Texas, complete Schedule T)
9. Principal occup Operations M	pation / Job title (See Instructions	5)	1 . ·	oyer (See Instruction: vison Young	S)
·			^	, , , , , , , , , , , , , , , , , , , ,	
4. Date	Full name of contributor	out-of-state PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)
08/22/2014	Josh Kerr	•		\$25.00	description (ii applicable)
	6. Contributor address:	City State	ZIP Code	\$25.00	
	300 Bowie St Apt 3703 Austin, TX	78703-4685			
	1			(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	3)	10 Empl	oyer (See Instruction	s)
Chief Execut	ive Officer		V	/ritten.com	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/02/2014	Josh Kerr			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$325.00	
	300 Bowie St Apt 3703 Austin, TX	78703-4685			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	S)	10 Empl	oyer (See Instruction	s)
Chief Execut	•			Vritten.com	

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## SCHEDULE A

The I	nstruction Guide explains how to	o complete	this form		Total pages Schedule A:     .209		
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
09/24/2014	Andrew Kever				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
• .	6105 Highland Hills Dr Austin, TX	78731-410	1			,	
1					(if travel outside o	Texas, complete Schedule T)	
9. Principal occur	pation / Job title (See Instruction	s)		10 Emp	loyer (See Instruction	s)	
Attorney				I	Enoch Kever PLLC		
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
09/08/2014	Ketan Kharod				contribution \$250.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	3230.00		
	36 Lone Oak Trl Sunset Valley, TX	K 78745-261	10				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instruction	s)		1	loyer (See Instruction	s)	
Attorney					Self		
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of contribution	8. In-kind contribution	
09/15/2014	Ali Raza Khataw				\$350.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$330.00	·	
	7914 Bee Cave Rd Austin, TX 787	46-4903					
					(if travel outside o	Texas, complete Schedule T)	
· ·	pation / Job title (See Instruction	s)		10 Emp	loyer (See Instruction	s)	
Chief Executi	ive Officer				Encotech Engineering		
4. Date	5. Full name of contributor	out-of-s	state PAC	/	7. Amount of	8. In-kind contribution	
09/15/2014	Nahid Khataw				contribution \$350.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$330.00		
	7914 Bee Cave Rd Austin, TX 787	46-4903					
					(if travel outside o	Texas, complete Schedule T)	
,	pation / Job title (See Instruction	s)			loyer (See Instruction	•	
President					Accurate CAD & Techn	ical Services	

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## **SCHEDULE A**

<del> </del>								
The I	nstruction Guide explains how to d	complete t	his form.			Total pages Schedule A:		
	<u> </u>	•				209		
2. FILER NAME	Stephen Adler					3. ACCOUNT # (Eti	hics Commission Filers)	
4. Date	Full name of contributor	out-of-sta	te PAC				8. In-kind contribution	
09/15/2014	Salva Khataw	<del></del>				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP C	ode	\$350.00		
	7914 Bee Cave Rd Austin, TX 78746	-4903			İ		·	
	* <u>-</u>					(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions)			10	Emplo	yer (See Instructions	s)	
None					No	one		
4. Date	5. Full name of contributor	out-of-sta	te PAC			7. Amount of	8. In-kind contribution	
09/15/2014	Zain Khataw		_			contribution	description (if applicable)	
37,13,2311		0:5.	D4-4-	710.0		\$350.00		
	6. Contributor address:	City	State	ZIP C	oae			
	7914 Bee Cave Rd Austin, TX 78746	-4903				,		
						(if travel outside of	Texas, complete Schedule T)	
<ol><li>Principal occuj</li></ol>	Principal occupation / Job title (See Instructions)				Emplo	yer (See Instruction:	s)	
iOS Advisor					Aş	pple Inc.		
4. Date	5. Full name of contributor	out-of-sta	ite PAC			7. Amount of	8. In-kind contribution	
09/22/2014	Ramzi Khazen					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP C	ode	\$250.00		
	   2604 Rollingwood Dr West Lake Hill	ls, TX 7874	46-5646					
	Ü	,				(if travel outside o	Texas, complete Schedule T)	
9. Principal occur	pation / Job title (See Instructions)		_	10	Emplo	yer (See Instruction	<u> </u>	
Attorney	,				•	cKool Smith PC	-,	
4. Date	5. Full name of contributor	out-of-sta	te PAC	<del></del>		7. Amount of	8. In-kind contribution	
09/05/2014	Phil Kiger					contribution	description (if applicable)	
09/03/2014		0.1	01-1-	710.0	\ !	\$350.00		
	6. Contributor address:	City	State	ZIP C	oae			
	3300 Foothill Dr Austin, TX 78731-5	823						
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)			10	Emplo	yer (See Instruction	s)	
Owner					Sv	veep Across Texas		

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## SCHEDULE A

The I	nstruction Guide explains how to	Total pages Schedule A:     209					
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-si	tate PAC	•	7. Amount of	8. In-kind contribution	
09/25/2014	Lois Kim		_		contribution	description (if applicable)	
,	6. Contributor address:	City	State	ZIP Code	\$50.00		
	1313 Bonham Ter Austin, TX 78704	1-2606					
					(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	Principal occupation / Job title (See Instructions)				10 Employer (See Instructions)		
4. Date	5. Full name of contributor	Out-of-st	tate PAC		7. Amount of	8. In-kind contribution	
09/09/2014	Paul Kim		_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
		,	Glate	211 0000		0.0	
	10524 Roy Butler Dr Austin, TX 78	/1 /-3905		,			
				1.5 = .	<u> </u>	Texas, complete Schedule T)	
9. Principal occup President	pation / Job title (See Instructions	)			oyer (See Instruction: TX Environmental Sol		
Flesident				A	TA Environmental Sol	utions	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)	
09/09/2014	Sarah Kim					description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	  10524 Roy Butler Dr Austin, TX 78	717-3905					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)		10 Empl	oyer (See Instruction	s)	
Homemaker	·				lone		
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
08/17/2014	David King	<del>_</del> .	_		contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$50.00		
	1808 Kerr Ave Austin, TX 78704-1	429					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)		10 Empl	oyer (See Instruction	l	
						,	

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## SCHEDULE A

The	Instruction Guide explains how t	Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/04/2014	Frank King	_	_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
	5602 Shoat Edge Ct Austin, TX 78	8756-1024				,
					(if travel outside o	Texas, complete Schedule T)
9. Principal occupation / Job title (See Instructions) 10 Emp					oyer (See Instructions)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/07/2014	Robert King		_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
		•		211 0000		
	4212 Park Hollow Ct Austin, TX	/8/46-1249				
O. Britania di ana	unation ( lab title (Oca lasta atio	\		140 51	4	Texas, complete Schedule T)
9. Principal occi Consultant	upation / Job title (See Instruction	ns) 			oyer (See Instruction Good Company Associa	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
08/12/2014	Sally King				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	·
	9800 Ravenwood Cv Austin, TX	78750				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occ	upation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	
4. Date	5. Full name of contributor	Out-of-	state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Barbara Klayman		_		contribution	description (if applicable)
09/25/2011	6. Contributor address:	City	State	ZIP Code	\$50.00	
	5708 Raindrop Cv Austin, TX 78	759-6249		•		
					(if travel outside o	Texas, complete Schedule T)
9. Principal occ	upation / Job title (See Instruction	ns)	<u> </u>	10 Empl	oyer (See Instruction	s)

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## SCHEDULE A

The	Instruction Guide explains how to	Total pages Schedule A:     209					
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Ron Klayman				contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$50.00		
	5708 Raindrop Cv Austin, TX 7875	59-6249					
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Empl	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	Out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
09/24/2014	Becky Klein				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	  40 N Interstate 35 Apt 11A3 Austir	1, TX 78701	1-4373				
-		٠			(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Emp	loyer (See Instruction	s) ·	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Karl R Koebel				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	10909 Conchos Trl Austin, TX 787	26-1421					
					(if travel outside o	Texas, complete Schedule T)	
Principal occu     Agent	pation / Job title (See Instruction	s)		1	10 Employer (See Instructions) Wiler & Associates		
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/04/2014	Danette Koebele				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$250.00		
	9312 Travertine Cv Austin, TX 78	735-1563					
					(if travel outside o	Texas, complete Schedule T)	
,	pation / Job title (See Instruction	s)		1	loyer (See Instruction	s)	
Retired				1	None		

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# SCHEDULE A

The	Instruction Guide explains how to	Total pages Schedule A:     209					
2. FILER NAME	Stephen Adler	<u>.</u>				hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
09/04/2014	John Koenig				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
,	2800 Waymaker Way Unit 17 Aust	in, TX 787	46-1846				
					(if travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Empl	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
07/16/2014	Karen Kolb Steakley				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$125.00		
	317 W 3rd St Austin, TX 78701-38	15					
,				,	(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	3)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/09/2014	Bharati Kommineni				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	4203 Cat Mountain Dr Austin, TX	78731-3704	4				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	Out-of-s	state PAC	<u> </u>	7. Amount of	8. In-kind contribution	
09/22/2014	Jennifer Koppel				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	5002 Lodge View Ln Austin, TX 7	8731-2633					
			(if travel outside o	Texas, complete Schedule T)			
9. Principal occu	Principal occupation / Job title (See Instructions)				loyer (See Instruction	s)	

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## SCHEDULE A

				•••••		
· Th	e Instruction Guide explains how t	o complete this form	۱.	Total pages Schedule A:     209		
2. FILER NAM	E Stephen Adler		,		hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/24/2014	Brad Korell			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$50.00		
	708 Limon Ln Austin, TX 78704-6	5254			,	
				(if travel outside o	Texas, complete Schedule T)	
9. Principal oc	cupation / Job title (See Instruction	10 Empl	oyer (See Instruction	s)		
4. Date	5. Full name of contributor	Out-of-state PAC		7. Amount of	8. In-kind contribution	
07/08/2014	Erin Kozma			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$20.00		
	2001 Faro Dr Apt 40 Austin, TX 7	8741-3342				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal oc	cupation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/13/2014	Erin Kozma			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$22.50		
	2001 Faro Dr Apt 40 Austin, TX 7	8741-3342				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal oc	cupation / Job title (See Instruction	ns)	10 Empl	oyer (See Instruction	5)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
07/08/2014	Liam Kozma			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$20.00		
	2001 Faro Dr Apt 40 Austin, TX 7	78741-3342				
	,			(if travel outside o	Texas, complete Schedule T)	
9. Principal oc	cupation / Job title (See Instruction	ns)	10 Emp	oyer (See Instruction	s)	
	•					

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## **SCHEDULE A**

The	Instruction Guide explains how to		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of	8. In-kind contribution
09/13/2014	Liam Kozma				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$22.50	
	2001 Faro Dr Apt 40 Austin, TX 78	8741-3342				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instruction	s)		10 Empk	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution
07/09/2014	Rita Kreisle		-		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$345.00	
	1512 Hardouin Ave Austin, TX 78	703-2519				
÷					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	10 Empl	oyer (See Instruction	s)		
Volunteer	<del></del>			N	one	
4. Date	5. Full name of contributor	out-of-st	tate PAC	1	7. Amount of	8. In-kind contribution
07/09/2014	Garrett Kreitman				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$7.00	
	2807 Rio Grande St Austin, TX 78	705-3603				
,					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	5)
4. Date	5. Full name of contributor	, out-of-st	tate PAC		7. Amount of	8. In-kind contribution
08/20/2014	Scot Krieger				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
	2905 Montebello Ct Austin, TX 78	3746-6816				
	,				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instruction	is)		10 Empl	oyer (See Instruction	s)

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## **SCHEDULE A**

The I	nstruction Guide explains how to	complete	this form			Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
08/21/2014	Alicia Kriese		_		contribution	description (if applicable)	
:	6. Contributor address:	City	State	ZIP Code	\$200.00		
	710 Colorado St Apt 8H Austin, TX	78701-30	29				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)	,		10 Em	ployer (See Instruction	•	
Оwпег	<del></del>				Perspectives Brand Strategy		
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of contribution	In-kind contribution description (if applicable)	
09/22/2014	Morton Krumholz				\$350.00	description (it applicable)	
·	6. Contributor address:	City	State	ZIP Code			
	4610 Ridge Oak Dr Austin, TX 7873	31-5212					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	Principal occupation / Job title (See Instructions)				ployer (See Instruction	s) · /	
Retired	· 				None		
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/22/2014	Susie Krumholz				contribution	description (if applicable)	
	6., Contributor address:	City	State	ZIP Code	\$350.00		
	4610 Ridge Oak Dr Austin, TX 7873	31-5212					
 	,				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu Realtor	pation / Job title (See Instructions	)		10 Em	Employer (See Instructions) Self		
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Dana Kunik	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
-	l 701 S Lamar Blvd Ste C Austin, TX	78704-15	47				
				-	(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	10 Em	mployer (See Instructions)				
Partner					Oslo Bar		

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## SCHEDULE A

The i	nstruction Guide explains how to	complete	this form.			Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler					3. ACCOUNT # (Ett	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-st	tate PAC _			7. Amount of	8. In-kind contribution	
09/25/2014	Daryl Kunik	<del></del>			_		description (if applicable)	
	.6. Contributor address:	City	State	ZIP	Code	\$350.00		
	701 S Lamar Blvd Ste C Austin, TX	78704-154	<del>1</del> 7			ä		
						(if travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)						imployer (See Instructions)		
Restaurant O	wner			L	E	nso Management, LLC		
4. Date	Full name of contributor	out-of-st	late PAC _			7. Amount of contribution	8. In-kind contribution	
07/12/2014	Faye Kuo				•		description (if applicable)	
	Contributor address:	City	State	ZIP	Code	\$100.00		
·	3431 N Hills Dr Apt 208 Austin, TX	78731						
1						(if travel outside of	(Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions)	)		1	0 Emplo	yer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-si	tate PAC _			7. Amount of	8. In-kind contribution	
09/22/2014	Don Kuykendall					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP	Code	\$100.00	``	
	   114 W 7th St Ste 625 Austin, TX 78	701-3010						
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)		10 Employer (See Instructions)				
4. Date	5. Full name of contributor	out-of-s	tate PAC _			7. Amount of	8. In-kind contribution	
09/19/2014	Carolyn LaMarsh Thompson					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP	Code	\$250.00		
	1710 Mount Larson Rd Austin, TX	78746-296	2					
				-		(if travel outside o	Texas, complete Schedule T)	
'	pation / Job title (See Instructions	)		1		oyer (See Instruction	s)	
Homemaker					N	None		

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## **SCHEDULE A**

The I	nstruction Guide explains how to	complete thi	s form.		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution	
09/18/2014	Lucille Lamy	_			contribution	description (if applicable)	
	Contributor address:	City S	tate Z	ZIP Code	\$350.00		
,	3401 Toro Canyon Rd Austin, TX 7	8746-1503					
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)     Homemaker					oyer (See Instruction	s)	
	F F. II	_		1 1			
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)	
09/18/2014	Pete Lamy				\$350.00	,	
	Contributor address:	City 5	tate 2	ZIP Code	,,,,,,		
	3401 Toro Canyon Rd Austin, TX 78746-1503						
					(if travel outside o	Texas, complete Schedule T)	
	Principal occupation / Job title (See Instructions)				oyer (See Instruction	s)	
Real Estate				Sa	age Land Company		
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Janet Lander			-	contribution	description (if applicable)	
	6. Contributor address:	City S	state :	ZIP Code	\$350.00	·	
	11000 Onion Creek Ct Austin, TX 7	78747-1608					
		'			(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)		10 Emplo	oyer (See Instruction	s)	
Manager				S	tate of Texas		
4. Date	5. Full name of contributor	out-of-state	PAC	- :	7. Amount of	8. In-kind contribution	
09/25/2014	Robert M Lander				contribution	description (if applicable)	
	Contributor address:	City S	State	ZIP Code	\$350.00	1	
	11000 Onion Creek Ct Austin, TX 7	78747-1608					
		~			(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	i)		10 Emple	10 Employer (See Instructions)		
Chief Execut	ive Officer			A	Austin Convention & Visitors Bureau		

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## SCHEDULE A

The I	nstruction Guide explains how to	complete	this form		Total pages Schedule A:			
		Complete	u 113 101111		209			
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution		
09/23/2014	Laraine Lasdon				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$50.00	·		
	7134 Valburn Dr Austin, TX 78731	-1819						
	l .				(if travel outside of	Texas, complete Schedule T)		
9. Principal occup	9. Principal occupation / Job title (See Instructions)					mployer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution		
09/12/2014	Edward Latson		_	<del></del>	contribution	description (if applicable)		
03/12/2014		0.4		710.0 - 1-	\$350.00			
	6. Contributor address:	City	State	ZIP Code				
	7210 Ellaview Ln Austin, TX 7875	9-3061						
	•				(if travel outside of	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)				10 Empl	oyer (See Instructions	s)		
Executive Dir	rector			A	oustin Regional Manufa	cturers Association		
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution		
09/10/2014	Harold P Laves				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$350.00	. 1		
	7508 Stonecliff Cir Austin, TX 787	31-1515						
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occuj	pation / Job title (See Instructions	s)		10 Empl	oyer (See Instruction:	s)		
Jeweler				E	Benolds			
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution		
09/ <b>10/2</b> 014	Myra Laves				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$350.00			
	7508 Stonecliff Cir Austin, TX 787	731-1515						
			•		(if travel outside o	Texas, complete Schedule T)		
9. Principal occup	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	<u> </u>		
Retired		-			ione			
	· · · · · · · · · · · · · · · · · · ·			·				

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## SCHEDULE A

The I	nstruction Guide explains how to	1. ,	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution	In-kind contribution description (if applicable)	
08/21/2014	Susan Laves 6. Contributor address:	City State	ZIP Code	\$100.00	честрион (п аррпсавие)	
	7605 Valburn Dr Austin, TX 78731-	-1161		(if trains) autoide a	Toyas semplata Schodula T	
9. Principal occup	pation / Job title (See Instructions	)	10 Emple	(if travel outside of Texas, complete Schedule T)  10 Employer (See Instructions)		
4. Date 08/21/2014	Full name of contributor  Mell Lawrence	out-of-state PAC		7. Amount of contribution	In-kind contribution description (if applicable)	
	Contributor address:     W Gibson St Austin, TX 78704	City State	ZIP Code	\$100.00		
			· •	<u> </u>	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)	10 Empl	oyer (See Instruction	s) ~	
4. Date 09/17/2014	5. Full name of contributor  Joe Lea	out-of-state PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)	
	Contributor address:  1036 Liberty Park Dr Apt 48A Aust	City State	ZIP Code	\$200.00		
	, ,			<u> </u>	Texas, complete Schedule T)	
Principal occul     Attorney	pation / Job title (See Instructions	)		oyer (See Instruction (cGinnis, Lochridge &	•	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)	
09/25/2014	Melisa Y Leal  6. Contributor address:	City State	ZIP Code	\$50.00		
	2407 Durwood St Austin, TX 78704		(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	)	10 Empi	oyer (See Instruction	<u> </u>	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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## SCHEDULE A

The I	nstruction Guide explains how to	complete	this form.		Total pages Schedule A:     209		
2. FILER NAME					3. ACCOUNT # (Ethics Commission Filers)		
2. PILER NAME	Stephen Adler			•	3. ACCOUNT # (EI	nics Commission Filers)	
4. Date	5. Full name of contributor	out-of-sta	ate PAC		7. Amount of contribution	8. In-kind contribution	
09/23/2014	Ellen LeBlanc				\$350.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00	`	
	8415 Chalk Knoll Dr Austin, TX 78	3735-1710			1		
					(if travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)					Employer (See Instructions)		
Muscian				N	one		
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of contribution	In-kind contribution description (if applicable)	
09/23/2014	Steve LeBlanc				\$350.00	description (ii applicable)	
	Contributor address:	City	State	ZIP Code	. 4350.00		
	8415 Chalk Knoll Dr Austin, TX 78	3735-1710					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	\$)		10 Emple	oyer (See Instruction	s)	
Founder				C	apRidge Partners		
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution	
09/09/2014	Emily Lee				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
:	10104 Eastman Cv Austin, TX 787	50-3911					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		1 "	oyer (See Instruction	s)	
Agent				L	ee Propertiies		
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)	
09/09/2014	Robert Lee		•		\$350.00	description (ii applicable)	
	6. Contributor address:	City	State	ZIP Code	3330.00		
	10104 Eastman Cv Austin, TX 787	50-3911					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Empl	oyer (See Instruction	s)	
Founder				L	Land Development and Construction		

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## **SCHEDULE A**

The I	instruction Guide explains how to	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/24/2014	Jason Leiker			contribution	description (if applicable)
/	6. Contributor address:	City State	ZIP Code	\$100.00	·
	2708 Westlake Dr Austin, TX 7874	6-1910			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occuj	pation / Job title (See Instructions	oyer (See Instruction	s)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/24/2014	Jenna Leiker	_ ` -		contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$150.00	
	2708 Westlake Dr Austin, TX 7874	6-1910			
•				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)	10 Empl	oyer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/30/2014	Rhona K Lessard			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$25.00	
	12600 Avery Ranch Blvd Apt 2012	Cedar Park, TX 786	13-1316		
	,			(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/14/2014	Lori Levy			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	7405 Teak Cv Austin, TX 78750-7	928			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)

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### **SCHEDULE A**

The	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler		-		3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-sta	ate PAC		7. Amount of	8. In-kind contribution	
08/15/2014	John Lewis	<del></del>			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$25.00		
	2010 Hamilton Ave Austin, TX 78	702-2822					
	i ·				(if travel outside o	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10 Em				10 Empl	oloyer (See Instructions)		
4. Date	Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution	
09/22/2014	John Lewis	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
	2010 Hamilton Ave Austin, TX 78	702-2822	•				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-st	ate PAC _	-	7. Amount of	8. In-kind contribution	
09/24/2014	Nancy Lewis				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	2623 Exposition Blvd Austin, TX	78703-1759					
		•			(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution	
09/15/2014	Schiller Liao	_	_		contribution	description (if applicable)	
	6. Contributor address:	City ·	State	ZIP Code	\$350.00		
	1206 Wilderness Cv Austin, TX 78	8746-6729					
	,				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	
Project Mana	ager			S	t. Edward's University		

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## SCHEDULE A

					_	
The	Instruction Guide explains how to	o complete	this form		Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
08/19/2014	Britt Lindelow				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	2502 Bridle Path Austin, TX 78703	3-3212			•	
					(if travel outside o	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)					oyer (See Instruction	s)
Homemaker				N	one	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution description (if applicable)
08/19/2014	Jan Lindelow				contribution \$350.00	description (ii applicable)
	6. Contributor address:	City	State	ZIP Code	00.00	
	2502 Bridle Path Austin, TX 78703	3-3212				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Emplo	oyer (See Instruction	s)
Director	·			S	elf	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/23/2014	Ellen F Lobb			•	contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$20.00	
	5403 Evans Ave Austin, TX 78751	1-1326				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-	state PAC _		7. Amount of	8. In-kind contribution
09/25/2014	David Lockett				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$200.00	
	7601 Newhall Ln Austin, TX 7874	16-4116				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Empl	oyer (See Instruction	s)
Business Cor	nsultant			S	elf	

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE A

The	Instruction Guide explains how to	n.	Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler		i,	3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/06/2014	Chris Long			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$25.00	
	1420 Preston Ave Austin, TX 7870	3-1902			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	10 Empl	oyer (See Instruction	5)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/24/2014	Brandi Loomis			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$75.00	
	115 Sandra Muraida Way Apt 430	Austin, TX 78703-4	772		
	•		•	(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/24/2014	Evan Loomis			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$75.00	
	6109 Turtle Point Dr Austin, TX 78	3746-7243	•		
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/10/2014	Morgan Lozier			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$50.00	
	5004 Lodge View Ln Austin, TX 7	8731-2633			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)

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### SCHEDULE A

The I	nstruction Guide explains how to	complete this	s form.		Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Eti	nics Commission Filers)
4. Date	5. Full name of contributor	out-of-state i	PAC			8. In-kind contribution
08/21/2014	Paul Lueb		_			description (if applicable)
	6. Contributor address:	City St	tate Z	IP Code	\$100.00	:
	43 Rainey St Apt 1703 Austin, TX 7	8701-4441				
					(if travel outside of	Texas, complete Schedule T)
				10 Emplo	yer (See Instructions	3)
Senior Advis	or			D	urbin Bennett Private V	Vealth Management
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of contribution	In-kind contribution description (if applicable)
09/25/2014	Paul Lueb				\$250.00	description (ii applicable)
	Contributor address:	City S	tate Z	IP Code	3230.00	
	43 Rainey St Apt 1703 Austin, TX 7	/8701-4441				,
	:				(if travel outside o	Texas, complete Schedule T)
9. Principal occupation / Job title (See Instructions)				10 Emplo	oyer (See Instruction:	s)
Senior Advis	or			D	urbin Bennett Private \	Vealth Management
4. Date	5. Full name of contributor	out-of-state	PAC	·	7. Amount of	8. In-kind contribution
09/25/2014	Tony Lumpkin				contribution	description (if applicable)
	6. Contributor address:	City S	tate Z	IP Code	, \$350.00	
	2806 Horseshoe Bend Cv Austin, TX	X 78704-4531			ı	
					(if travel outside of	Texas, complete Schedule T)
1	pation / Job title (See Instructions	)		1	oyer (See Instruction	s)
Executive				L	ucid Holdings, Inc.	
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of contribution	In-kind contribution     description (if applicable)
09/25/2014	Michele R Lynch				\$25.00	description (if applicable)
	6. Contributor address:	City S	tate Z	ZIP Code	\$23.00	
	2634 Cascade Falls Dr Austin, TX 7	8738-5315				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)		10 Empl	oyer (See Instruction	s) .

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### SCHEDULE A

The	Instruction Guide explains how to	complete this for	m.	Total pages School     209	
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC	•	7. Amount of	8. In-kind contribution
09/25/2014	Shaun Lynch			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$25.00	,
	2634 Cascade Falls Dr Austin, TX 7	8738-531 <i>5</i>			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/11/2014	Jeffrey Lynd			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	P O Boix 162034 Austin, TX 78716	•			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Hans Magnusson			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$250.00	·
	5203 Shoal Creek Blvd Austin, TX	78756-1812			
				(if travel outside o	Texas, complete Schedule T)
<ol> <li>Principal occu Engineer</li> </ol>	pation / Job title (See Instructions		I	oyer (See Instruction olor Bridge	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/17/2014	Audrey R Maislin			contribution \$175.00	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$175.00	
	4503 Eby Ln Austin, TX 78731-450	)4	•		
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	3)	10 Empl	loyer (See Instruction	s)

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### SCHEDULE A

				·		
The	Instruction Guide explains how to	complete this form		Total pages Schedule A:		
2. FILER NAME	<u>-</u>			209	hics Commission Filers)	
2. TECK WAIVE	Stephen Adler			3. ACCOUNT # (E)	incs Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC	_	7. Amount of	8. In-kind contribution	
09/17/2014	Raymond S Maislin			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$175.00		
	4503 Eby Ln Austin, TX 78731-450	)4				
				(if travel outside o	Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instructions	)	10 Emplo	oyer (See Instruction:	5)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/20/2014	Michele L. Mandell	_		contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$250.00		
	   4601 Eby Ln Austin, TX 78731-453	36				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)	10 Empl	oyer (See Instruction	s)	
President			N	fandell & Associates		
4. Date	5. Full name of contributor	out-of-state PAC	_	7. Amount of	8. In-kind contribution	
07/24/2014	Lauren Manford			contribution \$300.00	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$300.00		
	703 Split Rail Trl West Lake Hills,	TX 78746-5482				
				(if travel outside o	Texas, complete Schedule T)	
ľ	pation / Job title (See Instructions	5)	1	oyer (See Instruction	s)	
None			N	lone		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)	
08/21/2014	Andrew Mangan			\$100.00	description (it applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
	1600 Barton Springs Rd Austin, TX	78704-1081				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	3)	10 Empl	oyer (See Instruction	s)	

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### **SCHEDULE A**

The	Instruction Guide explains how to	complete	this form		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler	•			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
09/04/2014	Andrew Mangan				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
-	1600 Barton Springs Rd Austin, TX	78704-108	31				
					(if travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)     10 Emp				10 Empl	oyer (See Instruction	5)	
4. Date	5. Full name of contributor	out-of-s	tate PAC			8. In-kind contribution	
07/16/2014	Dawn Mann	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$10.00		
	5010 Glenmont Dr Houston, TX 770	081-2120			]		
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
07/11/2014	Johnny S Mann		·	-	contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$250.00		
	2401 Hunters Creek Cv Cedar Park	,TX 78613	3-5906		<u> </u>		
	,				(if travel outside o	Texas, complete Schedule T)	
Principal occu     Owner	pation / Job title (See Instructions	<b>;</b> )		· ·	oyer (See Instruction Iann Appraisal Service	•	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/09/2014	Robert Mann		,		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	P.O. Box 51116 Austin, TX 78763			-			
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Empl	oyer (See Instruction	s)	

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## **SCHEDULE A**

2. FILER NAME		The Instruction Guide explains how to complete this form.				Total pages Schedule A:     209		
31	tephen Adler				3. ACCOUNT # (Et	hics Commission Filers)		
4. Date 5.	Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution		
09/23/2014 Ke	eith D Maples		_		contribution	description (if applicable)		
6.	Contributor address:	City	State	ZIP Code	. \$350.00			
	1 S Mo Pac Expy Barton Oaks Pla 746-5776	aza II, Suite	200 Aus	tin, TX	(if travel outside o	Texas, complete Schedule T)		
9. Principal occupation	ion / Job title (See Instructions)	)		10 Empl	oyer (See Instruction:	s)		
Attorney	,			S	elf ,			
	. Full name of contributor	out-of-st	ate PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)		
	reg Marchbanks				\$350.00			
6.	. Contributor address:	City	State	ZIP Code				
230	07 Windsor Rd Apt 1 Austin, TX	78703-315	4					
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occupati	ion / Job title (See Instructions)	.)		10 Empl	oyer (See Instruction	s)		
investments					Diamond Ventures			
4. Date 5.	. Full name of contributor	Out-of-st	ate PAC _		7. Amount of	8. In-kind contribution		
09/21/2014 K	ristin Marcum			· · · · · · · · · · · · · · · · · · ·	contribution	description (if applicable)		
6.	. Contributor address:	City	State	ZIP Code	\$50.00			
696	05 Jester Blvd Austin, TX 78750-	.8343						
	35 Jester Bird Mastill, 171 70750	0.515			(if traval autoida o	Tayan samulata Cahadula T)		
9 Principal occupati	ion / Job title (See Instructions	-1		10 Empl	oyer (See Instruction	Texas, complete Schedule T)		
o. Timoparoccapati	on root the toes manachons	''		TO LIMP	cyci (occ manuonom	9)		
4. Date 5.	. Full name of contributor	out-of-st	ate PAC _		7. Amount of	8. In-kind contribution		
09/10/2014 R	obert Marks	_			contribution	description (if applicable)		
6.	. Contributor address:	City	State	ZIP Code	\$50.00			
622	23 Ledge Mountain Dr Austin, T	X 78731-37	16 ,					
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occupati	ion / Job title (See Instructions	<b>;</b> )		10 Emp	loyer (See Instruction	s)		

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### SCHEDULE A

The	Instruction Guide explains how to	complete	this form.		Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Alyssa Martin				contribution	description (if applicable)
·	Contributor address:	City	State	ZIP Code	\$350.00	
	2405 Dormarion Ln Ste 111 Austin	, TX <b>7</b> 8703	3-3005			
					(if travel outside o	Texas, complete Schedule T)
<ol><li>Principal occu</li></ol>	pation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction	s)
Accountant				Н	oltzman Partners	
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/25/2014	Carroll Martin				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
	   3214 Park Hills Dr Austin, TX 7874	46-5573				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	3)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-	state PAC _		7. Amount of	8. In-kind contribution
09/25/2014	Garrett Martin				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	2405 Dormarion Ln Ste 111 Austin	, TX 78703	3-3005			
					(if travel outside o	Texas, complete Schedule T)
Principal occu     Entrepreneur	pation / Job title (See Instructions	5)		· ·	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-	state PAC _		7. Amount of	8. In-kind contribution
08/29/2014	Rachel Martinez-Yoshida				contribution	description (if applicable)
\	6. Contributor address:	City	State	ZIP Code	\$350.00	
	300 S Lamar Blvd Apt 513 Austin,	TX 78704	-1159			
					(if travel outside o	Texas, complete Schedule T)
	pation / Job title (See Instructions	s)		1 '	oyer (See Instruction	s)
Homemaker				N	lone	

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### **SCHEDULE A**

				-	1. Total pages Sche	adula A:
The	Instruction Guide explains how to	complete this fo	orm.		209	
2. FILER NAME	Stephen Adler	<del></del>		<u> </u>	3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor		_		7. Amount of	8. In-kind contribution
		out-of-state PAI	c		contribution	description (if applicable)
08/20/2014	Jennene Mashburn				\$125.00	
·	6. Contributor address:	City Stat	e ZIP	Code		
	200 Congress Ave Unit 22DE Austin	n, TX 78701-454	12			
					(if travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)			1	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	Out-of-state PA	c		7. Amount of	8. In-kind contribution
08/20/2014	K. Ray Mashburn	_			contribution	description (if applicable)
	6. Contributor address:	City Stat	e ZIP	Code	\$125.00	
	200 Congress Ave Unit 22DE Austin	n TX 78701-454	12			
	200 Song. Coo 111 Conn. 2222 Trasen	, , . , . , . , . , . , . , . , .	· <b>-</b>		(if travel outside o	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)			1	0 Emple	oyer (See Instruction:	•
	,	,			, (	•
4. Date	5. Full name of contributor	out-of-state PA	.c		7. Amount of	8. In-kind contribution
09/04/2014	Vera Massaro	_	-		contribution	description (if applicable)
	6. Contributor address:	City Stat	te ZIP	Code	\$250.00	
	3000 Savoy Pl Ste 201 Austin, TX 7	•				
	Savey Trote 207 massin, Tro	0,0, 13.5			(if travel outside o	Texas, complete Schedule T)
9. Principal occu	L	<u> </u>	1	0 Empl	oyer (See Instruction	l
Real Estate	, , , , , , , , , , , , , , , , , , , ,			•	ualico Developments (	·
4. Date	5. Full name of contributor	out-of-state PA	.c		7. Amount of	8. In-kind contribution
09/25/2014	Vera Massaro				contribution	description (if applicable)
·	6. Contributor address:	City Stat	te ZIF	Code	\$100.00	
	3000 Savoy Pl Ste 201 Austin, TX 7	8757-4313				
	, , , , , , , , , , , , , , , , , , , ,				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)	1.	IO Empl	oyer (See Instruction	L
Real Estate	, . , . ,	,			ualico Developments (	

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### SCHEDULE A

The	Instruction Guide explains how to	1.	Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/08/2014	David M Mather			contribution	description (if applicable)
	Contributor address:	City State	ZIP Code	\$175.00	
	6412 Ledge Mountain Dr Austin, T	X 78731-2710		i.	
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)	10 Emple	oyer (See Instruction	s)
4. Date	5. Full name of contributor	oul-of-state PAC		7. Amount of	8. In-kind contribution
09/0 <b>8/2</b> 014	Lisa Mather			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$175.00	
	6412 Ledge Mountain Dr Austin, T	X 78731-2710			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Daniel Matheson			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$175.00	
	2901 Navidad Cv Austin, TX 7873.	5-1439			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Jane Matheson			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$175.00	
	2901 Navidad Cv Austin, TX 7873	5-1439			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	10 Empl	oyer (See Instruction	s)

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## SCHEDULE A

The I	instruction Guide explains how to o	complete this fo	orm.	-	Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PA	c		7. Amount of contribution	8. In-kind contribution description (if applicable)	
07/29/2014	Carol Mattingly				\$350.00	description (it applicable)	
	Contributor address:	City Stat	e ZI	P Code		١	
	11017 Hillside Dr Austin, TX 78736	7621					
					,	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Employer (See Instructions)			
Homemaker		_		N	one		
4. Date	5. Full name of contributor	out-of-state PA	° —		7. Amount of contribution	8. In-kind contribution description (if applicable)	
09/25/2014	Catherine A. Mauzy			•	\$250.00	gooding (in application)	
·	Contributor address:	City Stat	e ZI	P Code			
	5203 Shoal Creek Blvd Austin, TX 7	8756-1812					
	ı				(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions)				oyer (See Instruction	s)	
Attorney				M	lauzy Tucker LLP		
4. Date	5. Full name of contributor	out-of-state PA	c		7. Amount of	8. In-kind contribution	
08/21/2014	Nick Mayo		_		contribution \$300.00	description (if applicable)	
	6. Contributor address:	City Stat	e ZI	P Code	3300.00		
	7809 Lazy Ln Austin, TX 78757-141	5					
	~.			•	(if travel outside o	Texas, complete Schedule T)	
	pation / Job title (See Instructions)			10 Empk	oyer (See Instruction	s)	
Home Manag	ger			S	elf		
4. Date	5. Full name of contributor	out-of-state PA	c		7. Amount of	8. In-kind contribution	
08/16/2014	Amelia McCarron		1		contribution \$10.00	description (if applicable)	
	6. Contributor address:	City Star	e ZI	P Code	310.00		
	4509 Spanish Oak Ter Austin, TX 78	3731-5215					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)	<del></del>		10 Emplo	oyer (See Instruction	s)	
1							

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### SCHEDULE A

The	Instruction Guide explains how to	complete this for	m.	Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				hics Commission Filers)	
<ul><li>4. Date</li><li>08/16/2014</li><li>9. Principal occu</li></ul>	5. Full name of contributor William E McCarron 6. Contributor address: 4509 Spanish Oak Ter Austin, TX Terporation / Job title (See Instructions)			7. Amount of contribution \$10.00 (if travel outside o	8. In-kind contribution description (if applicable)  Texas, complete Schedule T)	
4. Date 07/25/2014	5. Full name of contributor  John McClish  6. Contributor address:  1801 Lavaca St Ste 120 Austin, TX	out-of-state PAC City State	ZIP Code	7. Amount of contribution \$350.00	In-kind contribution description (if applicable)	
Principal occu     Attorney	pation / Job title (See Instructions	s)		(if travel outside of Texas, complete Schedule T)  10 Employer (See Instructions)  Womack McClish Wall Foster Brooks, P.C.		
4. Date 09/24/2014	<ul><li>5. Full name of contributor</li><li>Lestie McConnico</li><li>6. Contributor address:</li><li>1403 Hardouin Ave Austin, TX 78°</li></ul>	Dout-of-state PAC City State 703-2516	ZIP Code	7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
Principal occu     Homemaker	pation / Job title (See Instructions	s)		(if travel outside of Texas, complete Schedule T)  10 Employer (See Instructions)  None		
4. Date 09/24/2014	5. Full name of contributor Steve McConnico 6. Contributor address: 1403 Hardouin Ave Austin, TX 78	out-of-state PAC  City State  703-2516		7. Amount of contribution \$350.00	In-kind contribution description (if applicable)  Texas, complete Schedule T)	
Principal occu     Attorney	pation / Job title (See Instructions	s)	1	loyer (See Instruction Scott Douglass and McC	•	

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### SCHEDULE A

		· ·					·	
The I	nstruction Guide explains how to	complete	this form			Total pages Schedule A:     209		
2. FILER NAME						3. ACCOUNT # (Ethics Commission Filers)		
Z. FILER NAIVIE	Stephen Adler					3. ACCOUNT # (Eti	nics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC _				8. In-kind contribution	
09/25/2014	Tracey McCoy Hale					\$150.00	description (if applicable)	
	6. Contributor address:	City	State	ZIF	Code	\$150.00		
	3112-A Windsor Road #110 Austin,	TX 78703	3-2350					
						(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)					10 Employer (See Instructions)			
4. Date	5. Full name of contributor	out-of-s	state PAC _			7. Amount of	8. In-kind contribution	
08/14/2014	Lou McCreary					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIF	Code	\$150.00		
	1108 Snowy Owl Ct Austin, TX 787	746-6647						
	a *	_				(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)			10 Empk	oyer (See Instruction:	s)	
Attorney					Se	elf		
4. Date	5. Full name of contributor	out-of-s	state PAC _			7. Amount of	8. In-kind contribution	
08/15/2014	Lou McCreary	<del></del> ,				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZII	Code	\$100.00		
	1108 Snowy Owl Ct Austin, TX 787	746-6647						
						(if travel outside o	Texas, complete Schedule T)	
	pation / Job title (See Instructions	)				oyer (See Instruction:	s)	
Attorney				į	50	elf		
4. Date	5. Full name of contributor	oul-of-s	state PAC _			7. Amount of contribution	8. In-kind contribution description (if applicable)	
08/15/2014	Patsy McCreary					\$250.00	description (ii applicable)	
1	Contributor address:	City	State	ZII	P Code	1		
	1108 Snowy Owl Ct Austin, TX 783	746-6647						
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)			10 Emple	oyer (See Instruction	s)	
Retired					N	one		

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### SCHEDULE A

The	Instruction Guide explains how to		Total pages Schedule A:			
			ionn.		209	
2. FILER NAME	Stephen Adler				3. ACCOUNT#(Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of	8. In-kind contribution
09/25/2014	Tracy McCreight				contribution	description (if applicable)
	Contributor address:	City Sta	ate Z	IP Code	\$50.00	
	3302 Clearview Dr Austin, TX 787	03-2748				
			•		(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)		10 Emplo	oyer (See Instruction:	5)
4. Date	5. Full name of contributor	out-of-state P.	AC		7. Amount of	8. In-kind contribution
07/16/2014	James McDermott	_			contribution	description (if applicable)
	6. Contributor address:	Çity Sta	ate Z	IP Code	\$350.00	
	2802 Windsor Rd Austin, TX 7870	3-3044				·
	,			,	(if travel outside o	Texas, complete Schedule T)
9. Principal occupation / Job title (See Instructions)					oyer (See Instruction	<u></u>
Entrepreneur	·			S	elf	· ·
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of	8. In-kind contribution
09/13/2014	Chuck McDonald	<del></del>			contribution	description (if applicable)
	6. Contributor address:	City , Sta	ate Z	IP Code	\$50.00	
	   1905 Chalk Rock Cv Austin, TX 78	3735-1 <i>7</i> 34				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	3)		10 Empl	oyer (See Instruction	<u> </u>
Owner				N	IcDonald Public Relati	ons
4. Date	5. Full name of contributor	out-of-state P	AC	_	7. Amount of	8. In-kind contribution
09/15/2014	Chuck McDonald				contribution	description (if applicable)
	6. Contributor address:	City Sta	ate Z	IP Code	\$150.00	
	1905 Chalk Rock Cv Austin, TX 78735-1734					
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)		10 Empl	oyer (See Instruction	s)
Owner				N	1cDonald Public Relati	ons

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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### **SCHEDULE A**

The I	nstruction Guide explains how to	The Instruction Guide explains how to complete this form.					
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-st	tate PAC		7. Amount of	8. In-kind contribution	
09/13/2014	Donna McDonald	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
,	1905 Chalk Rock Cv Austin, TX 78	735-1734					
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)					oyer (See Instruction	s)	
Public Relation	ons			N	CDonald Public Relation	ons.	
4. Date	5. Full name of contributor	out-of-st	tate PAC _		7. Amount of	8. In-kind contribution	
09/15/2014	Donna McDonald				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$200.00		
	1905 Chalk Rock Cv Austin, TX 78	3735-1734					
					(if travel outside o	Texas, complete Schedule T)	
Principal occup     Public Relation	pation / Job title (See Instructions	5)		· · ·	oyer (See Instruction	•	
				14			
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7 Amount of contribution	8. In-kind contribution description (if applicable)	
07/01/2014	Zach McDonald			•	\$6.29	adding the transfer of	
	6. Contributor address:	City	State	ZIP Code	0.23		
	13313 Briar Hollow Dr Austin, TX	78729-281	l			·	
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction	5)	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
09/18/2014	Susan G McFarland				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$75.00		
	8317 Young Ln Austin, TX 78737-	3140					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	3)		10 Empl	oyer (See Instruction	s)	

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### SCHEDULE A

The	Instruction Guide explains how to	complete th	ie form		Total pages Schedule A:		
			15 101111.			209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	Full name of contributor	out-of-state	PAC _		7. Amount of	8. In-kind contribution	
08/22/2014	Derek McGee				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$25.00		
	2505 Enfield Rd Apt 6 Austin, TX	78703-3792					
				\$	(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	Principal occupation / Job title (See Instructions)     10 Em					s) 	
4. Date	5. Full name of contributor	out-of-state	e PAC		7. Amount of	8. In-kind contribution	
08/21/2014	Lana McGilvray	_			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	810 W Mary St Austin, TX 78704-	•					
	brown wary berrusally, 17, 70701				(if travel outside o	f Texas, complete Schedule T)	
Principal occur	I pation / Job title (See Instruction:	s)		10 Empl	oyer (See Instruction		
Public Relati	•			1	last Public Relations		
4. Date	5. Full name of contributor	out-of-state	e PAC		7. Amount of	8. In-kind contribution	
09/09/2014	Ying McGuire				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$250.00		
	  6605 Beauford-Dr Austin, TX 7875	50-8125					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	<del></del>	
Executive M	anagement			т	echnology Integration	Group	
4. Date	5. Full name of contributor	out-of-stat	e PAC		7. Amount of	8. In-kind contribution	
09/23/2014	Daniel W McKee				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$200.00		
	2600 Rio Grande St Austin, TX 78	705-4017					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)	-	10 Empl	oyer (See Instruction	s)	
Dentist				J.	ourney Home Health C	are	

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### **SCHEDULE A**

<del></del>							
The	Instruction Guide explains how to	Total pages Schedule A:     209					
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution		
08/21/2014	Steve McKee			contribution	description (if applicable)		
	6. Contributor address:	City State	ZIP Code	\$50.00			
	202 S Tumbleweed Trl None Austin	n, TX 78733-4011		`			
				(if travel outside o	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)				10 Employer (See Instructions)			
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution		
09/22/2014	Mark McKenzie			contribution	description (if applicable)		
	6. Contributor address:	City State	ZIP Code	\$350.00			
	5222 Thunder Creek Rd # B-1 Aust	in, TX 78759-4037					
		-		(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	s)	1	loyer (See Instruction	s)		
Owner			F	Ranger Excavating			
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution		
09/24/2014	Anne McKinnerney			contribution	description (if applicable)		
ļ	6. Contributor address:	City State	ZIP Code	\$350.00			
	2501 McCullough St Austin, TX 78	3703-1741	٠.				
				(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	upation / Job title (See Instructions	s)	10 Emp	loyer (See Instruction	s)		
Homemaker			1	None			
4. Date	5. Full name of contributor	out-of-state PAC	· .	7. Amount of	8. In-kind contribution		
09/24/2014	John McKinnerney			contribution	description (if applicable)		
-	6. Contributor address:	City State	ZIP Code	\$350.00			
	2501 McCullough St Austin, TX 78	3703-1741					
1				(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	upation / Job title (See Instructions	3)	10 Emp	loyer (See Instruction	s)		
Investor	,			Castle Hill Management	t, Inc.		

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### SCHEDULE A

The	Instruction Guide explains how to	o complete this	s form.		Total pages Schedule A:		
2. FILER NAME					209 3. ACCOUNT # (Ethics Commission Filers)		
2. FILER NAME	Stephen Adler				3. ACCOUNT#(Eti	nics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state	PAC	•		8. In-kind contribution	
09/25/2014	Heather McKinney	_				description (if applicable)	
	6. Contributor address:	City S	tate 2	ZIP Code	\$100.00		
	800 W 5th St Apt 1206 Austin, TX	78703-5447			٩,	,	
· · · · · · · · · · · · · · · · · · ·					(if travel outside of	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10 Emp					oyer (See Instructions	3)	
4. Date	5. Full name of contributor			<u> </u>	7. Amount of	8. In-kind contribution	
09/09/2014	John McNabb	out-of-state	PAC		contribution	description (if applicable)	
03/03/2014		0:1:		710.0-4-	\$25.00		
	6. Contributor address:	•	tate 2	ZIP Code			
	10106 Pinehurst Dr Austin, TX 78	747-1301					
				T	·	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Emplo	oyer (See Instructions	s) 	
4. Date	5. Full name of contributor	out-of-state	PAC			8. In-kind contribution	
09/25/2014	Wayne Meissner				contribution	description (if applicable)	
	6. Contributor address:	City S	tate 2	ZIP Code	\$100.00		
	812 San Antonio St Ste 400 Austin	,TX 78701-22	24				
·					(if travel outside of	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Emple	oyer (See Instruction:	s)	
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution	
09/23/2014	Bradley Meltzer	_		_	contribution	description (if applicable)	
	6. Contributor address:	City S	tate 2	ZIP Code	\$250.00		
	11116 Schmidt Ln Manor, TX 786	53-3597	•				
		`.			(if travel outside or	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Emplo	oyer (See Instruction	S)	
Realtor				M	leltzer Properties	•	

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### SCHEDULE A

The I	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution		
09/24/2014	Sarah Meredith	_	_	•	contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$350.00			
	904 West Ave Unit 214 Austin, TX	78701-2236	6					
					(if travel outside of	Texas, complete Schedule T)		
9. Principal occup	pation / Job title (See Instructions	;)		10 Emp	loyer (See Instructions	s)		
Vice Presider	nt			1	800Oncologist.com			
4. Date	5. Full name of contributor	Out-of-st	ate PAC		7. Amount of contribution	In-kind contribution description (if applicable)		
09/25/2014	Sally S Metcalfe				\$25.00			
	Contributor address:	City	State	ZIP Code	-			
	901 S. Mopac Expressway, Plaza O	ne, Suite 36	00 Austin	TX 78746				
		<u> </u>			(if travel outside o	Texas, complete Schedule T)		
9. Principal occup	pation / Job title (See Instructions	i)		10 Emp	loyer (See Instruction	s) 		
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution		
09/25/2014	Steven Metcalfe	_	·		contribution	description (if applicable)		
	Contributor address:	City	State	ZIP Code	\$25.00			
	388 Cortona Dr West Lake Hills, T.	X 78746-44	38					
·					(if travel outside o	Texas, complete Schedule T)		
9. Principal occuj	pation / Job title (See Instructions	3)		10 Emp	loyer (See Instruction	s)		
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution		
09/04/2014	Lesya Milam				contribution	description (if applicable)		
	6. Contributor address: ,-	City	State	ZIP Code	\$300.00			
	3203 Clumpgrass Cv Austin, TX 78	3735-1535						
					(if travel outside o	Texas, complete Schedule T)		
,	pation / Job title (See Instructions	<b>6</b> )		1	loyer (See Instruction	s)		
Homemaker		_		1	None			

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### SCHEDULE A

The	The Instruction Guide explains how to complete this form.						Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler	-				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	Out-of-s	state PAC			7. Amount of	8. In-kind contribution	
08/25/2014	Bryce Miller	<u> </u>	_		<u></u>	contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIF	Code	\$350.00		
-	2708 Stratford Dr Austin, TX 7874	46-4641						
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ns)			10 Emplo	oyer (See Instruction	s)	
Principal					E	ndeavor Real Estate Gr	опр	
4. Date	Full name of contributor	Out-of-:	state PAC _			7. Amount of	8. In-kind contribution	
09/05/2014	Catherine Miller					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIF	Code	\$350.00		
	2905 Gilbert St Austin, TX 78703	-2217						
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	Principal occupation / Job title (See Instructions)     10 Emp					oyer (See Instruction	s)	
Adjunct Prof	essor				A	ustin Community Coll	ege	
4. Date	5. Full name of contributor	Out-of-	state PAC _			7. Amount of	8. In-kind contribution	
09/22/2014	Gail Miller					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIF	Code	\$100.00		
	5205 Ridge Oak Dr Austin, TX 78	3731-4811						
	·					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ns)			10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-	state PAC _			7. Amount of	8. In-kind contribution	
09/18/2014	Karen Miller					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZII	P Code	\$350.00		
	2324 Kinney Rd Austin, TX 7870	4-4916			٠			
						(if travel outside o	Texas, complete Schedule T)	
1	pation / Job title (See Instruction	ns)		$\neg \top$	•	oyer (See Instruction	s)	
Senior Accor	unting Specialist				A	PT Global		

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### SCHEDULE A

				<del> </del>	Total pages Schedule A:		
The I	Instruction Guide explains how to	o complete t	this form		209		
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	Out-of-sta	ate PAC		7. Amount of	8. In-kind contribution	
08/25/2014	Kristian C Miller	_		_		description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	2708 Stratford Dr Austin, TX 7874	6-4641					
,	,			•	(if travel outside of	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10 Emp					oyer (See Instruction:	s)	
Retired				N	one		
4. Date	5. Full name of contributor	Out-of-sta	ate PAC _			8. In-kind contribution	
07/01/2014	Shaine Millheiser				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$10.00		
	3800 N Lamar Blvd Austin, TX 78	756-4011					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Emplo	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-sta	ate PAC		7. Amount of	8. In-kind contribution	
08/21/2014	Amy Mitchell				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$25.00		
, :	98 San Jacinto Blvd Ste 1100 Aust	in, TX 78701	4255				
				•	(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Emplo	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	Out-of-sta	ate PAC _		7. Amount of	8. In-kind contribution	
08/05/2014	John Allen Mobley	<del></del>			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	2801 W 35th St Austin, TX 78703-	-1103					
				•	(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s) ¯		10 Emplo	oyer (See Instruction	s)	
Retired		•		N	one		

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## **SCHEDULE A**

The	The Instruction Guide explains how to complete this form.						Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler					3. ACCOUNT#(Et	hics Commission Filers)		
4. Date	5. Full name of contributor	out-of-s	state PAC _			7. Amount of	8. In-kind contribution		
07/02/2014	Charles Moeller					contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP	Code	\$50.00			
	5910 Courtyard Dr Ste 360 Austin	, TX 78731	-3341						
						(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	s)		1	0 Emple	oyer (See Instruction	s)		
4. Date	5. Full name of contributor	out-of-s	state PAC			7. Amount of	8. In-kind contribution		
09/15/2014	Nasim Momin		_			contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP	Code	\$350.00			
	   1521 Visalia En Austin, TX 78727	-4557							
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				, /if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	s)		1	0 Emple	oyer (See Instruction	<u> </u>		
Financial Ser					•	elf	<u>,                                      </u>		
4. Date	5. Full name of contributor	out-of-state PAC			.,	7. Amount of	8. In-kind contribution		
09/17/2014	Janelle Monney					contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP	Code	\$350.00			
	   11204 Solitary Fawn Trl Austin, T	X 78735-17	744				•		
			•			(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	s)			I0 Empl	oyer (See Instruction			
Leadership C	Consultant and Exeuctive Coach				Т	he Monney Group, LL	.c		
4. Date	5. Full name of contributor	out-of-	state PAC			7. Amount of	8. In-kind contribution		
09/17/2014	Jean-Claude Monney					contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP	Code	\$350.00			
	11204 Solitary Fawn Trl Austin, TX 78735-1744								
	·			_		(if travel outside o	Texas, complete Schedule T)		
,	pation / Job title (See Instruction	ıs)		1	•	oyer (See Instruction	s)		
Director					N	1icrosoft	<b>C</b>		

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### SCHEDULE A

The	Instruction Guide explains how t	Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of	8. In-kind contribution
09/03/2014	Ross Moody	_			contribution	description (if applicable)
	Contributor address:	City St	ate Z	ZIP Code	\$350.00	
	210 Lavaca St Apt 3704 Austin, T	X 78701-4607				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	oyer (See Instruction				
President			·	N	lational Western Life II	nsurance Company
4. Date	5. Full name of contributor	out-of-state F	AC	,	7. Amount of	8. In-kind contribution
09/24/2014	Adrian Moore	•			contribution	description (if applicable)
	6. Contributor address:	City St	ate 2	ZIP Code	\$50.00	
	2204 Toro Canyon Rd Austin, TX	78746-2415				,
	,				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state F	'AC		7. Amount of	8. In-kind contribution
09/25/2014	Bradley Moore	_			contribution	description (if applicable)
	6. Contributor address:	City St	ate Z	ZIP Code	\$350.00	`
	3301 Stratford Hills Ln Austin, TX	< 78746-4686				
		·			(if travel outside o	Texas, complete Schedule T)
Principal occu     Retired	pation / Job title (See Instruction	ns)		1	oyer (See Instruction Ione	s)
4. Date	5. Full name of contributor	out-of-state F	AC		7. Amount of	8. In-kind contribution
09/11/2014	Dawn Moore				contribution	description (if applicable)
1	6. Contributor address:	City St	ate 7	ZIP Code	\$50.00	
	12140 Tunnel Trl Manchaca, TX	78652-3827	,			
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	s)

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### SCHEDULE A

The	The Instruction Guide explains how to complete this form.				Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date 09/18/2014	<ul><li>5. Full name of contributor</li><li>Bee Moorhead</li><li>6. Contributor address:</li><li>4300 Rosedale Ave Austin, TX 787.</li></ul>	City State	ZIP Code	7. Amount of contribution \$25.00	8. In-kind contribution description (if applicable)	
9. Principal occu	pation / Job title (See Instructions	(if travel outside o	Texas, complete Schedule T) s)			
,		<u>,</u>				
4. Date 08/23/2014	<ul><li>5. Full name of contributor</li><li>Laura Mordecai</li><li>6. Contributor address:</li><li>21910 Plockton Dr Spicewood, TX</li></ul>	City State	ZIP Code	7. Amount of contribution \$125.00	8. In-kind contribution description (if applicable)	
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)	10 Empl	oyer (See Instruction	s)	
4. Date 08/21/2014	<ul><li>5. Full name of contributor</li><li>Eric Moreland</li><li>6. Contributor address:</li><li>28 Sundown Pkwy Austin, TX 7874</li></ul>	City State	ZIP Code	7. Amount of contribution \$300.00	8. In-kind contribution description (if applicable)	
9 Principal occu	pation / Job title (See Instructions	`	10 Empl	<u> </u>		
Realtor/Brok	· ·	) 		(if travel outside of Texas, complete Schedule T) yer (See Instructions) orcland Properties		
4. Date 09/25/2014	5. Full name of contributor  John Morran	out-of-state PAC		7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
	Contributor address:  608 Deep Eddy Ave Austin, TX 787	City State 703-4514	ZIP Code		Texas, complete Schedule T)	
1	pation / Job title (See Instructions	)	,	oyer (See Instruction	s)	
Mortgage Ba	nkei		1 1	exas Realty Capital		

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### SCHEDULE A

The I	The Instruction Guide explains how to complete this form.				Total pages Schedule A:	
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	3. ACCOUNT # (Ethics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
07/10/2014	Britt Morrison	-		contribution	description (if applicable)	
	Contributor address:	City State	ZIP Code	\$125.00		
	5005 W Frances Pl Austin, TX 787	31-5019				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10 Emp				oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC	•	7. Amount of	8. In-kind contribution	
07/10/2014	Brittany Morrison	<del></del>		contribution	description (if applicable)	
	Contributor address:	City State	ZIP Code	\$125.00		
: :	5005 W Frances Pl Austin, TX 787	31-5019				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	s)	10 Emple	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC	•	7. Amount of	8. In-kind contribution	
09/25/2014	Russell Munsch			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$250.00		
	2305 Golf Links Ct Spicewood, TX	78669-3040				
				(if travel outside o	Texas, complete Schedule T)	
Principal occup     Attorney	pation / Job title (See Instructions	s)	,	oyer (See Instruction Iunsch Hardt Kopf & F	•	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/14/2014	Mark Murdock			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
	11004 Plumewood Dr Austin, TX	78750-2828				
				(if travel outside o	Texas, complete Schedule T)	
	pation / Job title (See Instruction	s)	-	oyer (See Instruction	s)	
Retired			l N	one	·	

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### SCHEDULE A

The	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-st	tate PAC _		7. Amount of	8. In-kind contribution	
09/25/2014	Mark Murdock				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00	·	
	11004 Plumewood Dr Austin, TX	78750-2828 <sup>.</sup>					
					(if travel outside o	Texas, complete Schedule T)	
	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	
Retired		<del></del> .		N	one		
4. Date	5. Full name of contributor	out-of-st	tate PAC _		7. Amount of contribution	8. In-kind contribution	
09/25/2014	Matt Murphy				\$100.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	4825 Spicewood Springs Rd Austi	n, TX 78759	-8495				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Emple	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-st	tate PAC _		7. Amount of	8. In-kind contribution	
08/21/2014	Darin Muse				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$25.00		
,	802 W Elizabeth St Austin, TX 78	704-2338					
		_			(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ıs)	*	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	Out-of-st	tate PAC _	-	7. Amount of	8. In-kind contribution	
09/22/2014	Karl-Thomas Musselman				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$13.00		
	2819 Foster Ln Apt F224 Austin,	ΓX 78757-11	129		1		
	<u> </u>				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	s)	

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### **SCHEDULE A**

The	The Instruction Guide explains how to complete this form.				Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-stat	e PAC		7. Amount of	8. In-kind contribution
09/15/2014	Al Nanji				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	7909 Journeyville Dr Austin, TX 7	8735-1812				
					(if travel outside o	Texas, complete Schedule T)
	pation / Job title (See Instruction	s)		1 '	yer (See Instructions)	
Owner				V	ision Business Venture	es
4. Date	5. Full name of contributor	out-of-star	e PAC _		7. Amount of contribution	In-kind contribution description (if applicable)
09/24/2014	Jimmy Nassour				\$350.00	description (ir applicable)
	Contributor address:	City	State	ZIP Code		
	3839 Bee Caves Rd Ste 200 West	Lake Hills, TX	78746-6	5400		
			•		(if travel outside o	Texas, complete Schedule T)
Principal occu     Attorney	pation / Job title (See Instruction	(s)			oyer (See Instruction elf	s)
4. Date	5. Full name of contributor	out-of-stat	e PAC		7. Amount of	8. In-kind contribution
09/08/2014	David Near				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	2608 McCallum Dr Austin, TX 78	703-2541				
A					(if travel outside o	Texas, complete Schedule T)
	pation / Job title (See Instruction	is)			oyer (See Instruction	s)
President				Pi	sces Foods	
4. Date	5. Full name of contributor	out-of-sta	te PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)
09/24/2014	John Needham	. •			\$350.00	description (ii applicable)
	6. Contributor address:	City	State	ZIP Code	\$330.00	
	100 Congress Ave Ste 780 Austin,	TX 78701-27	21			
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Emplo	oyer (Seé Instruction	s)
Investor				Se	elf	

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### SCHEDULE A

			Al-1- 6		1. Total pages Sche	edule A:
i ne i	Instruction Guide explains how to	complete	tnis form		209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/24/2014	Lucy Needham				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	5404 Hurlock Dr Austin, TX 78731	-4524				
					(if travel outside o	Texas, complete Schedule T)
				oyer (See Instruction:	s)	
Independent	Beauty Consultant			M	lary Kay Cosmetics	
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/22/2014	Suzanne Newberg				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$175.00	
	7928 W Rim Dr Austin, TX 78731-	1242				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occuj	pation / Job title (See Instructions	i)		10 Emple	oyer (See Instruction	s)
		<u>-</u>				
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/25/2014	David Nguyen				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$10.00	
	   1201 Broadmoor Dr Apt B123 Aust	tin, TX 787	723-3160			
					(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	3)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/24/2014	Michael Nichols				contribution \$75.00	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$75.00	
	513 Kodiak Trl Cedar Park, TX 786	513-4109				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	s)		10 Empl	oyer (See Instruction	s)

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### SCHEDULE A

The	Instruction Guide explains how to	o complete	this form		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				3. ACCOUNT#(Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/24/2014	Ana Nichols-Farina		_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$75.00	·	
	513 Kodiak Trl Cedar Park, TX 78	613-4109				·	
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Emple	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/09/2014	Shannon Noble	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	4828 Canyonbend Cir Austin, TX	- 78735-6605	5				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	yer (See Instruction	<u> </u>	
Attorney				S	elf	· 	
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/25/2014	Jill Nokes		-		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$250.00		
	4200 Avenue F Austin, TX 78751-	-3721					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Empl	oyer (See Instruction	s)	
Landscape D	esign			S	elf		
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/25/2014	Robert Nokes				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$250.00		
	4200 Avenue F Austin, TX 78751-	-3721					
-					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Empl	oyer (See Instruction	S)	
Management	Consultant			G	reenlights for Nonprof	it Success	

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### SCHEDULE A

The	The Instruction Guide explains how to complete this form.				Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT#(Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/25/2014	Scott Norman				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	3605 Edgemont Dr Austin, TX 787	31-5816				
			Y.		(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	3)	-	10 Empl	oyer (See Instruction	s)
Attorney	· · · · · · · · · · · · · · · · · · ·			T	exas Association of Bu	ilders
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)
08/29/2014	Lana Norwood				\$50.00	qescription (ir applicable)
	6. Contributor address:	City	State	ZIP Code	\$30.00	
	4400 Ramsey Ave Austin, TX 7875	6-3209				
•					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	3)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Ethan Nouri	_	_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$5.00	
	2810 Salado St Apt 129 Austin, TX	78705-362	29			
	·	1			(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction	s)
4. Date	Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/14/2014	Brian Novy		_		contribution	description (if applicable)
	6 Contributor address:	City	State	ZIP Code	\$350.00	·
	3913 Edgerock Dr Austin, TX 7873	31-1426				
				<u> </u>	(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	3)		-	loyer (See Instruction	
Real Estate				Т	he Brian Novy Compa	ny

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### SCHEDULE A

The	The Instruction Guide explains how to complete this form.				Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of	8. In-kind contribution
08/30/2014	Tom Nuckols				contribution	description (if applicable)
	Contributor address:	City Sta	ite ZI	P Code	\$350.00	
	2910 Kassarine Pass Austin, TX 78	70 <del>4-46</del> 55				
		•			(if travel outside o	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)     10				10 Emplo	oyer (See Instruction	s)
lawyer	···			T	ravis County	
4 Date	5. Full name of contributor	out-of-state P	AC		7. Amount of contribution*	8. In-kind contribution
09/25/2014	Putt O'Brien				\$100.00	description (if applicable)
·	Contributor address:	City Sta	ite Zi	P Code	\$100.00	·
	717 Huff St Taylor, TX 76574-2653	3				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)		10 Emplo	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of	8. In-kind contribution
09/25/2014	Richard Obenhaus				contribution	description (if applicable)
	6. Contributor address:	City Sta	ate ZI	P Code	\$200.00	
	107 Las Lomas Dr West Lake Hills	, TX 78746-548	8			,
	·				(if travel outside o	Texas, complete Schedule T)
,	pation / Job title (See Instructions	s) .		10 Emple	oyer (See Instruction	s)
Real Estate	<u> </u>			·F	irst Austin Properties	
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of contribution	8. In-kind contribution
09/24/2014	Don Offield				\$50.00	description (if applicable)
	6. Contributor address:	City Sta	ate ZI	P Code	\$30.00	
	12801 Cinchring Ln Austin, TX 78'	727-4534				
	ì				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction	s)
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### **SCHEDULE A**

				1. Total pages Sche	edule A:	
	nstruction Guide explains how to complete this	s form.			209	
2. FILER NAME	Stephen Adler	•		3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributorout-of-state	PAC		7 Amount of	8. In-kind contribution	
09/25/2014	Conna Oram				description (if applicable)	
	6. Contributor address: City S	tate Z	IP Code	\$50.00		
	4300 Ramsey Ave Austin, TX 78756-3207					
				(if travel outside of	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10 Emplo				oyer (See Instruction:	5)	
4. Date	5. Full name of contributor out-of-state	PAC	-	7. Amount of	8. In-kind contribution	
08/30/2014	Robert Organ	·		contribution	description (if applicable)	
	6. Contributor address: City S	tate Z	IP Code	\$25.00		
	12229 Branston Dr Austin, TX 78753-6864				٠.	
			-	(if travel outside of	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)		10 Emplo	oyer (See Instructions	5)	
4. Date	5. Full name of contributor out-of-state	PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Marco A Orrantia	<del></del>	,	contribution	description (if applicable)	
	6. Contributor address: City S	tate Z	IP Code .	\$15.00		
	7200 Easy Wind Dr Unit 1029 Austin, TX 78752-	0003			,	
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)		10 Emplo	oyer (See Instruction	s)	
4. Date	Full name of contributorout-of-state	PAC		7. Amount of	8. In-kind contribution	
09/24/2014	Betty Osborne		_	contribution	description (if applicable)	
	6. Contributor address: City S	tate Z	IP Code	\$350.00		
	2106 Meadowbrook Dr Austin, TX 78703-2234					
				(if travel outside o	Texas, complete Schedule T)	
·	pation / Job title (See Instructions)		•	oyer (See Instruction	s)	
Artist			Se	elf		

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### SCHEDULE A

The I	nstruction Guide explains how to	o complete	this form		Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler		•		3. ACCOUNT # (Et	hics Commission Filers)
4. Date	Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
09/24/2014	Brian Ott				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	1706 Stoneridge Rd Austin, TX 78	746-7813				
					(if travel outside o	Texas, complete Schedule T)
				oyer (See Instruction	s)	
Landscape A	rehiteet			Т	BG Partners	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)
09/25/2014	David Ott				\$350.00	,
	6. Contributor address:	City	State	ZIP Code		
	5847 San Felipe St Ste 3600 Houst	on, TX 770	57-3263			
					(if travel outside o	Texas, complete Schedule T)
	pation / Job title (See Instruction	s)			oyer (See Instruction	s)
Real Estate				Т	he Hanover Company	
4. Date	5. Full name of contributor	Out-of-s	tate PAC _		7. Amount of	8. In-kind contribution
09/24/2014	Amanda Lee Oudt				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	1903 Elton Ln Austin, TX 78703-2	291 <b>7</b>				
	<u>.</u>				(if travel outside o	Texas, complete Schedule T)
1	pation / Job title (See Instruction	s)			oyer (See Instruction	s)
Manager				G	oogle	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution	8. In-kind contribution
09/24/2014	Randal Oudt				\$350.00	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	1903 Elton Ln Austin, TX 78703-2	2917				
	·			•	(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instruction	ıs)		10 Empl	oyer (See Instruction	s)
Vice President			T	Texas Restaurant Group, Inc.		

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### SCHEDULE A

The	The Instruction Guide explains how to complete this form.				Total pages Schedule A:	
	·	- Complete this form			209	
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/13/2014	Daniel M Page			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$150.00		
	6202 Burk Burnett Ct Austin, TX	78749-1876	`			
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occ	upation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/13/2014	Lee Page			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
	6202 Burk Burnett Ct Austin, TX	78749-1876				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occ	upation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/23/2014	Lolla Page		•	contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
	3300 Mount Bonnell Dr Austin, T.	X 78731-5727				
				· ·	Texas, complete Schedule T)	
9. Principal occ	upation / Job title (See Instruction	is)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Carolyn Palaima			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$25.00		
	505 E 40th St Austin, TX 78751-5	103				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occ	upation / Job title (See Instruction	ns)	10 Empl	oyer (See Instruction	s)	

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### SCHEDULE A

The	Instruction Guide explains how to	o complete	this form		Total pages Sche     209	
2. FILER NAME	Stephen Adler	<i>;</i> -			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	Out-of-s	tate PAC _		7. Amount of	8. In-kind contribution
09/19/2014	Jeffee Palmer		_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
	7611 Kiva Dr Austin, TX 78749-29	915				
					(if travel outside of	Texas, complete Schedule T)
9. Principal occupation / Job title (See Instructions)				10 Empli	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
09/10/2014	Virginia Palmer	_	-		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$25.00	
	1512 Woodlawn Blvd Austin, TX	78703-3369				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	upation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
09/22/2014	Jovita Pardo				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$5.00	
	404 W Milton St Austin, TX 7870-	4-3020		•		
					(if travel outside o	Texas, complete Schedule T)
9. Principal occi	upation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Jovita Pardo	_	=		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$20.00	
	404 W Milton St Austin, TX 7870	4-3020				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occi	upation / Job title (See Instruction	ıs)		10 Empl	oyer (See Instruction	is)

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### SCHEDULE A

	·				T. 12 T. 1		
Th	e Instruction Guide explains how t	o complete	this form	١.	, -	Total pages Schedule A:	
2. FILER NAM					209	3. ACCOUNT # (Ethics Commission Filers)	
Z. TILLINIANI	Stephen Adler				3. ACCOUNT # (EI	nics Continission Filets)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
08/06/2014	Edward Parken	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	7917 W Rim Dr Austin, TX 78731	1-1244					
	,				(if travel outside o	Texas, complete Schedule T)	
9. Principal oc	cupation / Job title (See Instruction	ns)		10 Empl	IO Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-	state PAC _	•	7. Amount of	8. In-kind contribution	
09/20/2014	Edward Parken				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$75.00		
	7917 W Rim Dr Austin, TX 7873	1-1244					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occ	cupation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	s)	
	·						
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of	8. In-kind contribution	
08/06/2014	Judith Parken	_	•		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00	:	
	7917 W Rim Dr Austin, TX 7873	1-1244				\	
					(if travel outside o	Texas, complete Schedule T)	
9. Principal oc	cupation / Job title (See Instruction	ns)		10 Emp	oyer (See Instruction		
	`						
4. Date	5. Full name of contributor	out-of-	state PAC		7. Amount of	8. In-kind contribution	
09/20/2014	Judith Parken				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$75.00	,	
	7917 W Rim Dr Austin, TX 78731-1244					·	
					(if travel outside o	Texas, complete Schedule T)	
9. Principal oc	cupation / Job title (See Instruction	ns)		10 Emp	loyer (See Instruction	1	

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## SCHEDULE A

The I	instruction Guide explains how to	complete t	his form.	··· · · · ·		Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				;	3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-sta	ite PAC			7. Amount of	8. In-kind contribution
09/15/2014	Lee Parsley				ľ		description (if applicable)
	6. Contributor address:	City	State	ZIP Cod	de	\$350.00	
	919 Congress Ave Ste 425 Austin, T	TX 78701-2	178				
						(if travel outside or	Texas, complete Schedule T)
	pation / Job title (See Instructions	)		10 E		yer (See Instructions	5)
Attorney		<del>- ·</del>		J	EI	ee Parsley P.C.	
4. Date	5. Full name of contributor	out-of-sta	nte PAC			7. Amount of	8. In-kind contribution
09/15/2014	Mayukh Parvin				ľ	contribution	description (if applicable)
,	6. Contributor address:	City	State	ZIP Cod	de	\$350.00	
	11901 Palisades Pkwy Austin, TX 7	8732-1242					• .
						(if travel outside of	Texas, complete Schedule T)
	Principal occupation / Job title (See Instructions)				-	yer (See Instruction:	s)
Principal					Lal	boni's Creations	
4. Date	5. Full name of contributor	Out-of-sta	ate PAC _			7. Amount of	8. In-kind contribution
09/15/2014	Abdul Patel	_		•		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Cod	de	\$350.00	
	1905 Far Gallant Dr Austin, TX 787	746-1811					
					ļ	(if travel outside o	Texas, complete Schedule T)
·	pation / Job title (See Instructions	5)		10 E		yer (See Instruction:	s)
President					Şu	nrise Mini Mart	
4. Date	5. Full name of contributor	out-of-sta	ate PAC _			7. Amount of contribution	In-kind contribution description (if applicable)
09/15/2014	Zarina N Patel					\$350.00	accomplian (ii applicable)
	6. Contributor address:	City	State	ZIP Cod	de	\$550.00	
	1905 Far Gallant Dr Austin, TX 787	746-1811					
						(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	;)		10 E	Emplo	yer (See Instruction	s)
Director					So	ra Hospitality Inc.	

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## SCHEDULE A

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The	Instruction Guide explains how to	o complete this	form.		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	oul-of-state Pa	AC		7. Amount of	8. In-kind contribution	
09/25/2014	Chris Paz				contribution	description (if applicable)	
	6. Contributor address:	City Sta	ite Z	IP Code	\$10.00	•	
	504 W 24th St Ste E Austin, TX 78	3705-5231			·		
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10					Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of	8. In-kind contribution	
09/25/2014	Eric Peabody	_			contribution	description (if applicable)	
	6. Contributor address:	City Sta	ite Z	IP Code	\$50.00		
	2605 Deerfoot Trl Austin, TX 7870	04-2715					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empli	0 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-state P.	AC		7. Amount of	8. In-kind contribution	
09/25/2014	Brent Peffer				contribution	description (if applicable)	
	6. Contributor address:	City Sta	ate Z	IP Code	\$75.00		
	I 1403 Maidenstone Dr Austin, TX	78759-4431					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	5)	
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of	8. In-kind contribution	
07/13/2014	. Bert Pence				contribution	description (if applicable)	
	6. Contributor address:	City Sta	ate Z	IP Code	\$350.00		
	708 Rio Grande St Austin, TX 787	01-2782					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	
Investments	Investments					<del>-</del>	

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## SCHEDULE A

The	Instruction Guide explains how to	o complete this for	n,	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler		<u> </u>		hics Commission Filers)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution		
07/13/2014	Sonya Pence			contribution	description (if applicable)		
	6. Contributor address:	City State	ZIP Code	\$350.00	·		
•	708 Rio Grande St Austin, TX 787	01-2779					
				(if travel outside o	Texas, complete Schedule T)		
	upation / Job title (See Instruction	s)	10 Empl	10 Employer (See Instructions)			
Retired	<u>.                                    </u>		N	None			
4. Date	5. Full name of contributor	out-of-state PAC		7 Amount of contribution	8. In-kind contribution		
09/22/2014	Ruth Pennebaker			\$100.00	description (if applicable)		
	6. Contributor address:	City State	ZIP Code	\$100.00			
·	98 San Jacinto Blvd # 703 Austin,	TX 78701-4082					
				(if travel outside o	Texas, complete Schedule T)		
9. Principal occi	upation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution		
09/25/2014	Wesley Peoples	_		contribution	description (if applicable)		
	6. Contributor address:	City State	ZIP Code	\$350.00			
	7511 Fireoak Dr Austin, TX 78759	9-6439					
·		•	•	(if travel outside o	Texas, complete Schedule T)		
9. Principal occi Builder	upation / Job title (See Instruction	s)		oyer (See Instruction Ves Peoples Homes	s)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution		
09/22/2014	Alicia Perez	<del>-</del> .		contribution	description (if applicable)		
•	6. Contributor address:	City State	ZIP Code	\$50.00	î		
	1715 Palma Plz Austin, TX 78703	-3930					
				(if travel outside o	Texas, complete Schedule T)		
9. Principal occi	upation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)		

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### SCHEDULE A

The	Instruction Guide explains how t	ı.	Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler			. = =.	3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/04/2014	Herbert Perkins	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
	401 Almarion Dr Austin, TX 7874	6-5612					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Emplo	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
07/08/2014	Jim Person		_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	   1207B W 9th St Austin, TX 78703	-4801					
					(if travel outside o	Texas, complete Schedule T)	
Principal occul     Investor	pation / Job title (See Instruction	s)		1	Employer (See Instructions) Self		
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution	
07/08/2014	Lee H Person			-	contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	  1207B W 9th St Austin, TX 78703	-4801			:		
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu Investor	pation / Job title (See Instruction	s) _	,		oyer (See Instruction	s)	
4. Date	5. Full name of contributor	aut-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Pete Peters		_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$125.00		
	PO Box 5788 Austin, TX 78763-5	788					
	(				(if travel outside o	  Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	is)		10 Empl	oyer (See Instruction	s)	
					· ·		

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## **SCHEDULE A**

The	Instruction Guide explains how to	complete this form	1.	1	Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler		<del></del> -		thics Commission Filers)	
<ol> <li>Date</li> <li>08/20/2014</li> <li>Principal occi</li> </ol>	5. Full name of contributor  Peter L Pfeiffer 6. Contributor address:  1800 W 6th St Austin, TX 78703-47  upation / Job title (See Instructions)		ZIP Code	7. Amount of contribution \$100.00 (if travel outside oployer (See Instruction	8. In-kind contribution description (if applicable)  Texas, complete Schedule T)	
4. Date 07/25/2014	<ul><li>5. Full name of contributor</li><li>Emily Phillips</li><li>6. Contributor address:</li><li>5201 Wayborne Hill Dr Austin, TX</li></ul>	City State	ZIP Code	7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
Principal occi	upation / Job title (See Instructions)	10 Em	(if travel outside of Texas, complete Schedule T)  10 Employer (See Instructions)			
4. Date 07/02/2014	5. Full name of contributor  John Pieratt  6. Contributor address:  2311 Woodlawn Blvd Austin, TX 78	out-of-state PAC City State	ZIP Code		8. In-kind contribution description (if applicable)	
9. Principal occi	upation / Job title (See Instructions)	) )	10 Em	(if travel outside of Texas, complete Schedule T)  10 Employer (See Instructions)  Self		
4 Date 09/25/2014	<ul><li>5. Full name of contributor</li><li>Michelle Pierce</li><li>6. Contributor address:</li><li>1110 W Oltorf St None Austin, TX</li></ul>	City State 78704-5329	ZIP Code		In-kind contribution description (if applicable)  Texas, complete Schedule T)	
Principal occ     Paralegal	upation / Job title (See Instructions	)	10 Em	ployer (See Instruction Loewy Law Firm	ns)	

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## SCHEDULE A

The	Instruction Guide explains how to	complete	this form	<u> </u>	Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler	-			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
09/19/2014	Christy Pipkin					description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	2600 N Cuernavaca Dr Austin, TX	78733-2111	1 .			:	
					(if travel outside of	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Empl	oloyer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
08/21/2014	Everett Plante				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$125.00		
	12316 Pratolina Dr Austin, TX 787	39-1967					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	S)		10 Emp	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
08/21/2014	Mandy Plante				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$125.00		
	12316 Pratolina Dr Austin, TX 787	39-1967			·		
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	\$)		10 Emp	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
08/20/2014	Jacob Plotkin				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$250.00		
,	1301 W 9th 1/2 St Apt 300 Austin,	TX 78703-	4872				
ras <sub>i</sub>					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Emp	loyer (See Instruction	s)	
Retired		_		1	None		

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## SCHEDULE A

The I	nstruction Guide explains how to	complete	this form		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler	·				hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
07/30/2014	Douglas Plummer	_			contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$350.00		
	301 E 35th St Austin, TX 78705-16	512		•			
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)					oyer (See Instruction	s)	
Managing Di	rector			Ir	Independence Title		
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/16/2014	Catherine Polito				contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$250.00		
	   11200 Alhambra Dr Austin, TX 78	759-5001					
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Empl	oyer (See Instruction	s)	
Director	i			С	ockrell School of Engi	neering	
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
07/31/2014	Florence Ponziano				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$10.00		
	515 Kemp St Austin, TX 78741						
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/13/2014	Florence Ponziano	<u> </u>	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
	515 Kemp St Austin, TX 78741						
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction:	s)		10 Empl	oyer (See Instruction	s)	
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## **SCHEDULE A**

The	Instruction Guide explains how to	Total pages Schedule A:     209					
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
08/29/2014	Dave Porter	· —		-	contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$200.00		
	15 Lovegrass Ln Sunset Valley, TX	78745-255	59				
	·				(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	loyer (See Instruction	s)				
Sr. Vice Pres	ident .			A	Austin Chamber of Com	merce	
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
07/29/2014	David Porter				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$150.00		
	  80 Red River St Apt 209 Austin, TX	κ 78701-42	232				
	·				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)		10 Emp	loyer (See Instruction	s)	
					<u> </u>	<u> </u>	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)	
09/21/2014	Mike Powers				\$10.00	describitoji (ii applicable)	
·	6. Contributor address:	City	State	ZIP Code	310.00		
	5404 Dainfed Shield Dr Austin, TX	78735			·		
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Emp	loyer (See Instruction	s)	
4. Date	5. Full name of contributor	Out-of-s	state PAC _	,	7. Amount of	8. In-kind contribution	
09/15/2014	Kashmira Prasla				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	113 N Saddle Ridge Dr Cedar Park	,TX 78613	3-7718				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)		10 Emp	loyer (See Instruction	s)	
Director					Mira Business Inc.		

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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## SCHEDULE A

The f	nstruction Guide explains how to	complete	this form.		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler	•	<del></del>		3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC	` `		8. In-kind contribution	
09/15/2014	Sharif Prasta	_	_		contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$350.00		
	I 13 N Saddle Ridge Dr Cedar Park,	TX 78613	-7718				
					(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	oation / Job title (See Instructions)	)		10 Emplo	oyer (See Instruction	s)	
Chief Executi	ive Officer			G	reater Austin Merchant	Cooperative	
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
09/13/2014	Ana Presse				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$25.00		
	5909 Overlook Dr Austin, TX 78731	-4221					
	, , , , , , , , , , , , , , , , , , , ,				(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)					oyer (See Instruction	L	
	,, ,, ,, ,, ,, ,				-, (		
4. Date	Full name of contributor	Out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Wesley Prewitt		_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$150.00		
	3334 Far View Dr Austin, TX 78730	•					
	55541 th Tiew Dt Mastin, 172 76750	7-3303			(if traval autoida a	Texas, complete Schedule T)	
9 Principal occur	<u>l</u> pation / Job title (See Instructions)	`		10 Empl	oyer (See Instruction	<u> </u>	
o. Trinoparocca	· · · · · · · · · · · · · · · · · · ·	'		TO Empi	oyer (occ manacion	3,	
4. Date	5. Full name of contributor	Out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
07/23/2014	Eva B Price		_		contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$350.00		
	1722 Pine Knoll Dr Austin, TX 7875	58-4608					
]					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)	)		10 Empl	oyer (See Instruction	s)	
Writer				υ	US Hispanic Contractors		

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## SCHEDULE A

The I	nstruction Guide explains how to	Total pages Schedule A:     209					
2. FILER NAME	Stephen Adler			-	hics Commission Filers)		
4. Date	5. Full name of contributor	out-of-state PAC	•	7. Amount of	8. In-kind contribution		
09/10/2014	Burton Pritzker	<u> </u>		contribution	description (if applicable)		
	Contributor address:	City State	ZIP Code	\$25.00			
	2917 Bushnell Dr Austin, TX 7874	5-4737					
e		-		(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction:	5)	10 Emplo	oyer (See Instruction			
4. Date	5. Full name of contributor	out-of-state PAC	•	7. Amount of	8. In-kind contribution		
09/16/2014	Ann E Proctor	,		contribution	description (if applicable)		
	6. Contributor address:	City State	ZIP Code	\$250.00			
	1813 Vance Cir Austin, TX 78701-	•					
	,			(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	10 Empl	u: oyer (See Instruction				
Director of P	rint Services	·	G	GSD&M			
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution		
08/25/2014	Keith Purcell		_	contribution	description (if applicable)		
	6. Contributor address:	City State	ZIP Code	\$250.00			
	4610 Grand Cypress Dr Austin, TX	78747-1330					
				(if travel outside o	Texas, complete Schedule T)		
	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)		
Sales and Ma	rketing	· 	F	lik Conference			
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution		
09/25/2014	Jerry Quick			contribution	description (if applicable)		
	6. Contributor address:	City State	ZIP Code	\$250.00			
	10500 Signal Hill Rd Austin, TX 7	8737-9212					
				(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)		
Broker	•	'n	(	uick & Company			

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## SCHEDULE A

The	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
<ol> <li>Date</li> <li>09/25/2014</li> <li>Principal occur</li> </ol>	5. Full name of contributor Todd Ramberg 6. Contributor address: 4916 Barclay Heights Ct Austin, The spation / Job title (See Instructions)	City X 78746-73	State	ZIP Code	7. Amount of contribution \$50.00 (if travel outside or over (See Instructions)	8. In-kind contribution description (if applicable)  Texas, complete Schedule T)	
4. Date 09/22/2014	5. Full name of contributor Jill C. Ramirez 6. Contributor address: 5309 Presidio Rd Austin, TX 78745	City	state PAC _	ZIP Code	7. Amount of contribution \$200.00	8. In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)     Corporate Secretary				- I	(if travel outside of Texas, complete Schedule T)  10 Employer (See Instructions)  Latino Health Forum		
4. Date 09/21/2014	<ul><li>5. Full name of contributor</li><li>Suzy Ranney</li><li>6. Contributor address:</li><li>5706 Adams Ave # B Austin, TX 7</li></ul>	City	state PAC _	ZIP Code	7. Amount of contribution \$250.00	8. 1n-kind contribution description (if applicable)	
Principal occu Co-Owner	pation / Job title (See Instructions	s)		(if travel outside of Texas, complete Schedule T)  10 Employer (See Instructions)  Paper Place			
4. Date 09/25/2014	<ul><li>5. Full name of contributor</li><li>James F. Ray</li><li>6. Contributor address:</li><li>518 Cliff Dr Austin, TX 78704-141</li></ul>	City	state PAC _	ZIP Code	7. Amount of contribution \$175.00	8. In-kind contribution description (if applicable)  Texas, complete Schedule T)	
9. Principal occu	ipation / Job title (See Instructions	s)		10 Empl	oyer (See Instruction	s)	

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## SCHEDULE A

					· · · · · · · · · · · · · · · · · · ·
The	Instruction Guide explains how to	Total pages Schedule A:			
,		· <u>·</u>		209	
2. FILER NAME	= Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Katherine Ray			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$175.00	
	518 Cliff Dr Austin, TX 78704-14	13			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occ	upation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	Out-of-state PAC	•	7. Amount of	8. In-kind contribution
09/17/2014	William Reagan, II			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	4100 McBrine Pl Austin, TX 7874	6-1928			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occ	upation / Job title (See Instruction	is)	10 Empl	oyer (See Instruction	s)
President			. R	teagan National Advert	ising
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/16/2014	Lucy Reagan			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	4100 McBrine Pl Austin, TX 7874	6-1928			
				(if travel outside o	Texas, complete Schedule T)
	cupation / Job title (See Instruction	is)	10 Empl	oyer (See Instruction	s)
Philanthrop	pist		S	elf	
4 Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/22/2014	Dana Reaud			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$175.00	
	511 Lake Cliff Trl Austin, TX 787	46-4682			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occ	cupation / Job title (See Instruction	ns)	10 Emp	loyer (See Instruction	s)

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## SCHEDULE A

<del></del>					
The I	Instruction Guide explains how to	complete this form	m.	Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler		•	3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/22/2014	Wayne Reaud			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$175.00	
	507 Lake Cliff Trail Austin, TX 78'	746-4682			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Laura Reed			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	   1700 Westlake Dr West Lake Hills	TX 78746-3718			
				(if travel outside o	Texas, complete Schedule T)
Principal occu     Photographer	pation / Job title (See Instructions	s)		oyer (See Instruction elf	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Todd Reed			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	1700 Westlake Dr West Lake Hills	TX 78746-3718			
				(if travel outside o	Texas, complete Schedule T)
Principal occu     Attorney	pation / Job title (See Instructions	s)		oyer (See Instruction leed & Scardino LLP	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/22/2014	Tracey Reichanadtet			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	1810 Cattle Dr Cedar Park, TX 786	513-1489			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	10 Empl	oyer (See Instruction	s)
1			1		

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## **SCHEDULE A**

The I	The Instruction Guide explains how to complete this form.					1. Total pages Schedule A: 209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-st	late PAC		7. Amount of	8. In-kind contribution	
09/23/2014	Norma L Remadna				contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$100.00		
	1801 Rockmoor Ave Austin, TX 78	703-2028					
ļ					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)     10 Em					oyer (See Instruction	s)	
4. Date	5. Full name of contributor	Out-of-s	late PAC		7. Amount of	8. In-kind contribution	
07/24/2014	Richard Ressler		_		contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$250.00	· : '	
	2307 Wilke Dr Austin, TX 78704-33	250	•				
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)			10 Emplo	oyer (See Instruction	s)		
Attorney				M	loster Wynne Ressler		
4. Date	5. Full name of contributor	oul-of-s	tate PAC		7. Amount of	8. In-kind contribution	
07/25/2014	Shari Wynne Ressler	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$250.00		
	2307 Wilke Dr Austin, TX 78704-3	250					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)		10 Empk	oyer (See Instruction	s)	
Attorney				IV.	IWR Legal		
4 Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
08/06/2014	Alexander C Reyer				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	1715 E 6th St Ste 204 Austin, TX 7	8702-2781					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)	·	10 Empl	oyer (See Instruction	s)	

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## SCHEDULE A

The	nstruction Guide explains how to		Total pages Schedule A:     209				
2. FILER NAME	Stephen Adier						hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tate PAC _				8. In-kind contribution
09/24/2014	Lora Reynolds						description (if applicable)
	6. Contributor address:	City	State	ZIP Co	ode	\$250.00	
	1501 Canyon Vw West Lake Hills,	TX 78746-	2856			:	
		· .				(if travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instruction	s)		10 1	_	yer (See Instructions	s)
Art Dealer					Se	elf	
4. Date	5. Full name of contributor	Out-of-s	tate PAC _				In-kind contribution description (if applicable)
08/29/2014	Allison Rice					\$25.00	description (ii applicable)
	Contributor address:	City-	State	ZIP Co	ode	\$23.00	
	2905 Brian Wood Ct Cedar Park, T	X 78613-51	143				
						(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10	Emplo	yer (See Instructions	5)
4. Date	Full name of contributor	out-of-s	tate PAC _			7. Amount of	8. In-kind contribution
09/24/2014	Brian Rice					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Co	ode	\$175.00	
	2905 Brian Wood Ct Cedar Park, T	X 78613-5	143				
						(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10	Emplo	oyer (See Instruction:	s)
4. Date	5. Full name of contributor	Out-of-s	state PAC			7. Amount of	8. In-kind contribution
09/24/2014	Julie Rice		1			contribution	description (if applicable)
	Contributor address:	City	State	ZIP Co	ode	\$175.00	
	2905 Brian Wood Ct Cedar Park, T	TX 78613-5	143				
						(if travel outside o	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instruction	s)		10	Emplo	oyer (See Instruction	s)

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## **SCHEDULE A**

The I	nstruction Guide explains how to comple		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Eti	nics Commission Filers)	
4. Date	5. Full name of contributorout-o	-state PAC		7. Amount of	8. In-kind contribution	
09/24/2014	Kirk Rice				description (if applicable)	
	6. Contributor address: City	State	ZIP Code	\$350.00		
	2907 E 14th St Austin, TX 78702-1628		,			
		•		(if travel outside o	Texas, complete Schedule T)	
<ol><li>Principal occup</li></ol>	pation / Job title (See Instructions)		10 Emplo	yer (See Instructions	5)	
Attorney			Se	elf		
4. Date	5. Full name of contributorout-c	f-state PAC		7. Amount of	8. In-kind contribution	
09/24/2014	Stephen Rice			contribution	description (if applicable)	
	6. Contributor address: City	State	ZIP Code	\$100.00		
·	2013 Simond Ave Apt B Austin, TX 78723-	4569				
				(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions)		10 Emplo	D Employer (See Instructions)		
4. Date	5. Full name of contributor	f-state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Autumn Rich	<del></del>		contribution	description (if applicable)	
	6. Contributor address: City	State	ZIP Code	\$350.00		
	3106 Highland Ter W Austin, TX 78731-53	21				
				(if travel outside o	Texas, complete Schedule T)	
Principal occup     Event Produc	pation / Job title (See Instructions) tion			oyer (See Instructions utumn Rich & Co	s)	
4. Date	5. Full name of contributor out-	f-state PAC		7. Amount of	8. In-kind contribution	
07/16/2014	Sean Richardson			contribution	description (if applicable)	
	6. Contributor address: City	State	ZIP Code	\$350.00		
	1109 Yaupon Valley Rd Austin, TX 78746-	1328				
	•			(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions)		10 Emplo	oyer (See Instruction	s)	
Principal and	сто		P	rivateer Capital		

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### **SCHEDULE A**

The I	nstruction Guide explains how to		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler					hics Commission Filers)
4. Date	5. Full name of contributor	out-of-sta	ate PAC		7. Amount of	8. In-kind contribution
09/11/2014	Karin Richmond	_	_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	1343 Spyglass Dr Austin, TX 78746	-6906				
·					(if travel outside of	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions)	)		10 Emplo	oyer (See Instruction:	s)
Business Ince	ntives Consultant			Îr	ntelligent Incentives Inc	:
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of contribution	In-kind contribution description (if applicable)
09/11/2014	Seth Richmond				\$350.00	accomplian (in application)
1	6. Contributor address:	City	State	ZIP Code	\$350.00	
	1343 Spyglass Dr Austin, TX 78746	5-6906				,
					(if travel outside o	Texas, complete Schedule T)
9. Principal occur	9. Principal occupation / Job title (See Instructions) 10 Emp			10 Empl	oyer (See Instruction	s)
Volunteer				N	one	
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of	8. In-kind contribution
07/23/2014	Jordan Ring				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$25.00	
, l	4404 E Oltorf St Apt 11103 Austin,	TX 78741-	6069			
	•				(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	)		10 Empl	oyer (See Instruction	s)
					•	
4. Date	Full name of contributor	out-of-st	ate PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)
09/25/2014	Wesley Ritchie				\$350.00	description (ii applicable)
	6. Contributor address:	City	State	ZIP Code	3330.00	
	1601 Surrey Hill Dr Austin, TX 787	46-7337				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	·)		10 Empl	oyer (See Instruction	s)
Attorney	·				lash Chapman Schreibe	r Leaverton &

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### **SCHEDULE A**

The I	nstruction Guide explains how to	Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Eti	nics Commission Filers)
4. Date	5. Full name of contributor	out-of-sta	ate PAC		7. Amount of	8. In-kind contribution
09/ <b>19/2</b> 014	John Ritts	_	_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$200.00	
	PO Box 5503 Austin, TX 78763-550	03				
					(if travel outside of	Texas, complete Schedule T)
<ol><li>Principal occup</li></ol>	pation / Job title (See Instructions	yer (See Instructions	5)			
Retired				N	one	
4. Date	5. Full name of contributor	out-of-sta	ate PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)
09/25/2014	Richel Rivers				\$250.00	
	Contributor address:	City	State	ZIP Code		
	1209 W 5th St Ste 200 Austin, TX 7	78703-5287				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occup	Principal occupation / Job title (See Instructions)			10 Emplo	oyer (See Instruction	s)
Attorney				R	ivers McNamara, PLL0	<u> </u>
4. Date	5. Full name of contributor	out-of-sta	ate PAC		7. Amount of	8. In-kind contribution
09/ <b>0</b> 9/ <b>2</b> 014	David Roberts	_			contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$350.00	
	  1501 Northwood Rd Austin, TX 78°	703-1943				
				••	(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	3)		10 Empl	oyer (See Instruction	s)
Chief Financi	ial Officer			E	ndeavor Real Estate Gr	оир .
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of	8. In-kind contribution
09/02/2014	Allison Robertson				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$250.00	
	3001 Bonnie Rd Austin, TX 78703-	2807				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	-	10 Empl	oyer (See Instruction	s)
	ions Manager			s	t. Andrews School	

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### SCHEDULE A

The	Instruction Guide explains how to		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler			3. ACCOUNT#(Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/29/2014	Jim Robinson			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$50.00	
	4400 Ramsey Ave Austin, TX 7875	66-3209			
				(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	3)	10 Emplo	oyer (See Instruction	5)
4. Date	5. Full name of contributor	Out-of-state PAC		7. Amount of	8. In-kind contribution
08/25/2014	Dubravka Romano			contribution	description (if applicable)
30,2011	Contributor address:	City State	ZIP Code	\$100.00	
		City State	ZIP Code		
	4105 Sinclair Ave Austin, TX 7875	6-3524			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s) 	10 Empl	oyer (See Instruction	s) .
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/22/2014	Ana I Rosal	_		contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$175.00	
		•			
	5204 Wayborne Hill Dr Austin, TX	. 78723-4629			
			T	· '	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s) 	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/10/2014	Elyse Rosenberg	_		contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$50.00	
	6200 Mountain Villa Dr Austin, TX	₹ 78731-3523			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	10 Empl	oyer (See Instruction	s)

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## SCHEDULE A

The I	nstruction Guide explains how to	<del> </del>	Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler					hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-stat	e PAC			8. In-kind contribution	
09/25/2014	Joe C. Ross	_		· · · · · · · · · · · · · · · · · · ·	contribution	description (if applicable)	
	Contributor address:	City	State :	ZIP Code	\$350.00		
	3305 Oakmont Blvd Austin, TX 78	703-1347					
	·				(if travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)     Executive					10 Employer (See Instructions) CSID		
4. Date	5. Full name of contributor	Out-of-stat	e PAC	······································	7. Amount of	8. In-kind contribution	
09/25/2014	Daphne Roth	odi-ci-siai				description (if applicable)	
03/23/2014	6. Contributor address:	City	State	ZIP Code	\$100.00		
		,		ZIP Code			
	3571 Far West Blvd # 95 Austin, T	X 78731-306	4			_	
		<del> </del>		140 == 1		Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)		10 Empli	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-stat	te PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Terry Roth	_			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	3571 Far West Blvd # 95 Austin, T.	X 78731-306	4		ļ		
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-stat	te PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Christin Rowan-Adams				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$25.00		
	1307 Norwalk Ln Apt 102 Austin,	TX 78703-37	45				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)	<u> </u>	10 Empl	oyer (See Instruction	s)	
L				1		<u></u>	

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## SCHEDULE A

The I	nstruction Guide explains how to	complete t	this form.		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler		_		3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-sta	ate PAC		7. Amount of	8. In-kind contribution	
09/10/2014	Ellen Rozman	_			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$250.00		
	2901 Willowbridge Cir Austin, TX	78703-1055			)		
	<u> </u>				(if travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)     Educator				·	10 Employer (See Instructions) Self		
4. Date	5. Full name of contributor	Out-of-sta	ate PAC		7. Amount of	8. In-kind contribution	
09/22/2014	Haylie Rudy	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
. 1	1603 Eva St Austin, TX 78704-3012	•	0.0.0				
	1003 Eva St Austin, 1 × 78704-3012	2			(% to a vel a velo i da a a a	T T	
Principal occupation / Job title (See Instructions)     1					over (See Instruction:	Texas, complete Schedule T)	
9. Principal occup	pation 7 dob title (See metholions	,		TO Limple	oyer (See msaucaon	3)	
4. Date	5. Full name of contributor	Out-of-sta	ate PAC		7. Amount of	8. In-kind contribution	
08/20/2014	Alejandro Ruelas		_		contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$350.00		
	8218 Chalk Knoll Dr Austin, TX 78	735-1702					
·					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)		10 Empl	oyer (See Instruction	s)	
Chief Market	ing Officer			<u> </u>	atinworks	<u> </u>	
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of	8. In-kind contribution	
08/20/2014	Ana Ruelas				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	8218 Chalk Knoll Dr Austin, TX 78	735-1702					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)		10 Empl	10 Employer (See Instructions)		
Consultant				S	elf		

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## SCHEDULE A

The I	Instruction Guide explains how to	complete	this form		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
07/21/2014	Boo Ruiz	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$25.00		
	7600 Basil Cv Austin, TX 78750-7	937					
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Empl	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	Out-of-	state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	James Ruiz	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
		•	Otato	En odde			
	10801 Yucca Dr Austin, TX 78759	-6037					
0.00				<del></del>		Texas, complete Schedule T)	
9. Principal occuj Attorney	pation / Job title (See Instruction:	s) 			oyer (See Instruction Vinstead PC	s)	
4. Date	5. Full name of contributor	out-of-	state PAC _		7. Amount of	8. In-kind contribution	
09/23/2014	Doug Rummel				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	171 Country Crt Austin, TX 78737						
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occur	Ipation / Job title (See Instruction	s)		10 Emp	loyer (See Instruction		
Vice Presider	· •	-,		,	Carlson, Brigance & Do	,	
4. Date	5. Full name of contributor	Dout-of-	state PAC		7. Amount of	8. In-kind contribution	
09/21/2014	Ellen Russell		_		contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$350.00		
	6809 Tree Fern Ln Austin, TX 787	50-8135					
					(if travel outside o	Texas, complete Schedule T.)	
9. Principal occur	I pation / Job title (See Instruction	s)		10 Empl	loyer (See Instruction	<u> </u>	
Retired		•		1 '	None	,	

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## **SCHEDULE A**

					1 Total pages Scho	adule A	
The	Instruction Guide explains how to	complete	this form		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler	•			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	Out-of-st	tate PAC		7. Amount of	8. In-kind contribution	
08/29/2014	Dorothy Rutishauser			1		description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$50.00		
	4200 Jackson Ave Apt 5015 Austin.	TX 78731	-6061		·		
					(if travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)					10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
08/29/2014	Robert Rutishauser				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
	4200 Jackson Ave Apt 5015 Austin	TX <b>7</b> 8731,	-6061				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	;)		10 Empl	oyer (See Instruction	5)	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
09/08/2014	Stephanie Sachnowitz	· · · · · · · · · · · · · · · · · · ·			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	311 W 5th St Unit 705 Austin, TX 7	78701-3804	1				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)			oyer (See Instruction	•	
Agent	· · · · · · · · · · · · · · · · · · ·			V	Vilson & Goldrick Real	tors	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of contribution	In-kind contribution description (if applicable)	
07/25/2014	Tunc Samiloglu				\$350.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	4550.00		
2302 Cheswick Ct Austin, TX 78746-1934						,	
					(if travel outside o	Texas, complete Schedule T)	
•	pation / Job title (See Instructions	s)		1	oyer (See Instruction	s)	
Software Engineer				N	MCA Connect		

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### **SCHEDULE A**

The	Instruction Guide explains how to	complete this form	).	Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler		-	3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/23/2014	Katharine Sanel		•	contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$125.00	
	2508 Addison Ave Austin, TX 7875	7-2313		1	
				(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	oyer (See Instruction:	s)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/08/2014	Fern Santini			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	1412 Ethridge Ave Austin, TX 7870	3-2540			, )
				(if travel outside o	Texas, complete Schedule T)
9. Principal occupation / Job title (See Instructions) 10 Emplo				oyer (See Instruction	s)
Interior Desi	gner		A	bode I Fern Santini De	sign
4. Date	5. Full name of contributor	out-of-state PAC			8. In-kind contribution
09/08/2014	Jerre D Santini			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	1412 Ethridge Ave Austin, TX 7870	03-2540			
				(if travel outside o	Texas, complete Schedule T)
,	pation / Job title (See Instructions	i)	· · · · · ·	oyer (See Instruction	s)
General Con	tractor		S	antini Contstruction	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/20/2014	Jeri Saper	·		contribution \$50.00	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$30.00	
	4633 Far West Blvd Apt 5 Austin, T	ΓX 78731-2860			
,				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	3)	10 Empl	oyer (See Instruction	s)

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## SCHEDULE A

The	Instruction Guide explains how t	o complete	this form	·	Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler					hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-st	tate PAC		7. Amount of	8. In-kind contribution	
07/20/2014	Paul Saper .				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
	4633 Far West Blvd Apt 5 Austin,	TX 78731-2	860				
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)					Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-st	late PAC _		7. Amount of	8. In-kind contribution	
09/25/2014	Tonimaris Sarain	-			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$5.00		
	1511 Faro Dr Apt 34 Austin, TX 7	8741-3238					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-st	tate PAC		7. Amount of	8. In-kind contribution	
08/20/2014	Drew Sawyer				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00	-	
	4912 Westview Dr Austin, TX 78	731-4736					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Empl	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
08/20/2014	Emy Lou Sawyer				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
	4912 Westview Dr Austin, TX 78	731-4736					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	loyer (See Instruction	s)	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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## **SCHEDULE A**

The	The Instruction Guide explains how to complete this form.						Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler					3. ACCOUNT # (Eti	hics Commission Filers)	
4. Date	5. Full name of contributor	Out-of-s	state PAC _			7. Amount of	8. In-kind contribution	
09/10/2014	Shubhada Saxena	_	_			contribution	description (if applicable)	
	Contributor address:	City	State	ZIF	Code	\$350.00		
	67 Saint Stephens School Rd Austi	n, TX 7874	6-3232					
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occur	pation / Job title (See Instruction	s)			10 Emplo	yer (See Instructions	s)	
Student					N	one		
4. Date	5. Full name of contributor	out-of-s	state PAC _			7. Amount of	8. In-kind contribution	
08/29/2014	Clinton Sayers					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIF	Code	\$100.00		
	PO Box 160364 Austin, TX 78716	-0364						
			,			(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)			10 Emplo	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	Dout-of-s	state PAC	. '	•	7. Amount of	8. In-kind contribution	
09/24/2014	Carol Ann Sayle		_			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZII	Code	\$25.00		
	  3414 Lyons Rd Austin, TX 78702-	3727					·	
,				•		(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)			10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-	state PAC			7. Amount of	8. In-kind contribution	
09/25/2014	Charles Scarborough	_				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZII	P Code	\$100.00		
	6701 N Park Dr Austin, TX 78757	-2303						
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ıs)			10 Empl	oyer (See Instruction	s)	
				- 1				

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## SCHEDULE A

		3				
The	Instruction Guide explains how to	Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler		· · ·		ACCOUNT # (Ethics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution	In-kind contribution description (if applicable)	
09/25/2014	George Schlemeyer  6. Contributor address: .	City State	ZIP Code	\$100.00		
	PO Box 50572 Austin, TX 78763-05	572		/if tenuel exteids o	Toyan complete Schodule T	
9. Principal occu	L pation / Job title (See Instructions	)	10 Emplo	yer (See Instruction	Texas, complete Schedule T) s)	
4. Date 09/19/2014	Full name of contributor     Randy Marie Schlueter     Contributor address:	out-of-state PAC _	ZIP Code	7. Amount of contribution \$250.00	In-kind contribution description (if applicable)	
	PO Box 2227 Austin, TX 78768-222	•	211 Code	(if travel outside o	Texas, complete Schedule T)	
<ol><li>Principal occu Retired</li></ol>	pation / Job title (See Instructions	) ,	1	oyer (See Instruction one	s)	
4. Date 09/22/2014	<ul><li>5. Full name of contributor</li><li>Randy Marie Schlueter</li><li>6. Contributor address:</li><li>PO Box 2227 Austin, TX 78768-222</li></ul>	out-of-state PAC _ City State	ZIP Code	7. Amount of contribution \$100.00	In-kind contribution description (if applicable)	
Principal occu Retired	pation / Job title (See Instructions			(if travel outside o oyer (See Instruction one	Texas, complete Schedule T)	
4. Date 09/19/2014	Full name of contributor     Stan Schlueter	out-of-state PAC		7. Amount of contribution	In-kind contribution description (if applicable)	
(J <i>9)</i> 19/2014	6. Contributor address: PO Box 2227 Austin, TX 78768-227	City State	ZIP Code	\$250.00	Texas, complete Schedule T)	
Principal occu     Engineer	pation / Job title (See Instructions	) 1		oyer (See Instruction		

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## SCHEDULE A

The	Instruction Guide explains how to	o complete	this form	,		Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler					hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
09/22/2014	Stan Schlueter		_		contribution	description (if applicable)	
٠.	Contributor address:	City	State	ZIP Code	\$100.00		
	PO Box 2227 Austin, TX 78768-22	227					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Emp	loyer (See Instruction	s)	
Engineer					Self		
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
09/22/2014	Jurgen Schmandt	_			contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$100.00		
	300 Bowie St Apt 3902 Austin, TX	•					
	1500 Bowle St Apt 5502 Austin, 17	10/03-400	9				
O Dringing Lagran	nation / Joh title (See Jackweties	_\		40 5	<del></del>	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	S)		10 Emp	oloyer (See Instruction	5)	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
07/28/2014	Robert M Schmidt	<del>_</del>	_		contribution	description (if applicable)	
,	6. Contributor address:	City	State	ZIP Code	\$350.00	·	
	3422 S Lamar Blvd Austin, TX 78	•					
	5-22 5 Earnar Dive Austin, 174 76	704-7231			diff house of a subside of	Tanas and the Oak adula T	
9 Principal occu	L pation / Job title (See Instruction	<u>e)</u>		10 Emr	oloyer (See Instruction	Texas, complete Schedule T)	
Investor	pation / 305 tide (See matraction	<b>-</b>		I	Self		
4 Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/19/2014	Will Schnier	<del></del>			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	815 Brazos St Ste 534A Austin, TX	X 78701-260	08				
	<u>/i.</u>				(if travel outside of	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)	· · · · · · · · · · · · · · · · · · ·	10 Emp	oloyer (See Instruction	ns)	
Engineer					Big Red Dog		

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## SCHEDULE A

The	Instruction Guide explains how t	o complete this for		Total pages Schedule A:		
			· · · · · · · · · · · · · · · · · · ·	209		
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/03/2014	Raquel Schuster			contribution	description (if applicable)	
	6. Contributor address.	City State	ZIP Code	\$50.00		
	5906 Upvalley Run Austin, TX 78	731-3669				
				(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
07/29/2014	Aaron R Schwartz			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$50.00		
	1122 Colorado St Apt 2102 Austir	n, TX 78701-2142				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	upation / Job title (See Instruction	ns)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/08/2014	Aaron R Schwartz	_		contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$50.00	·	
	1122 Colorado St Apt 2102 Austir	n, TX <b>7</b> 8701-2142				
				(if travel outside o	i Texas, complete Schedule T)	
9. Principal occu	upation / Job title (See Instruction	ns)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Jeffrey Schwartz			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
	2915 E 16th St Apt STE Austin, T	X 78702-1540				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	upation / Job title (See Instruction	ns)	10 Empl	oyer (See Instruction	s)	

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## **SCHEDULE A**

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Th	e Instruction Guide explains how t	Total pages Schedule A:     209				
2. FILER NAM	E Stephen Adler	<del></del>			3. ACCOUNT # (Ethics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
07/29/2014	Marilyn Schwartz	_		contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$50.00		
1	1122 Colorado St Apt 2102 Austir	ı, TX 78701-2142				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal oc	cupation / Job title (See Instruction	ns)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/08/2014	Marilyn Schwartz			contribution	description (if applicable)	
	Contributor address:	City State	ZIP Code	\$50.00		
	1122 Colorado St Apt 2102 Austir	ı, TX 78701-2142				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal oc	cupation / Job title (See Instruction	ns)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC	•	7. Amount of	8. In-kind contribution	
09/25/2014	Wallace Scott III			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$350.00	ļ	
	2901 Oakhurst Ave Austin, TX 78	3703-1951				
(				(if travel outside o	Texas, complete Schedule T)	
<ol><li>Principal oc</li></ol>	cupation / Job title (See Instruction	ns)	10 Empl	oyer (See Instruction	s)	
Real Estate	e		T	he Sutton Company	•	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/17/2014	Shannon Sedwick			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
,	350 King Arthur Ct Austin, TX 78	3746-5043				
				(if travel outside of	Texas, complete Schedule T)	
9. Principal oc	cupation / Job title (See Instruction	ns)	10 Emp	loyer (See Instruction	s)	

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## SCHEDULE A

The	The Instruction Guide explains how to complete this form.					Total pages Schedule A:	
2. FILER NAME	Stephen Adler	<u> </u>		. <u> </u>	3. ACCOUNT # (Ethics Commission Filers)		
4. Date 09/05/2014	5. Full name of contributor John Sepehri 6. Contributor address: 5817 Mount Bonnell Rd Austin, T.	City	State	ZIP Code	7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)  10 Em					(if travel outside of Texas, complete Schedule T) oyer (See Instructions)		
4. Date 09/10/2014	Full name of contributor     Jonathan Sessler     Contributor address:     Type 1	City	state PAC _	ZIP Code	7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)	
Principal occu     Professor	pation / Job title (See Instruction	s)			(if travel outside o oyer (See Instruction Iniversity of Texas	Texas, complete Schedule T) s)	
4. Date 07/15/2014	<ul><li>5. Full name of contributor</li><li>Hill Shands</li><li>6. Contributor address:</li><li>2407 S 6th St Austin, TX 78704-5.</li></ul>	City	state PAC _	ZIP Code	7. Amount of contribution \$100.00	8. In-kind contribution description (if applicable)	
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Empl	(if travel outside o oyer (See Instruction	Texas, complete Schedule T) s)	
4. Date 09/25/2014	<ul><li>5. Full name of contributor</li><li>Hill Shands</li><li>6. Contributor address:</li><li>2407 S 6th St Austin, TX 78704-5</li></ul>	City	state PAC _	ZIP Code	7. Amount of contribution \$50.00	8. In-kind contribution description (if applicable)  Texas, complete Schedule T)	
9. Principal occu	ipation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	is)	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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## SCHEDULE A

The	The Instruction Guide explains how to complete this form.					Total pages Schedule A:	
2. FILER NAME	•	· · · · · · · · · · · · · · · · · · ·	·		209	hics Commission Filers)	
Z. TIEERTYAME	Stephen Adler		. 2		3. A0000N1 # (E	nica commission meraj	
4. Date	5. Full name of contributor	out-of-state PA	/C		7. Amount of	8. In-kind contribution	
09/22/2014	Robert Shands					description (if applicable)	
	6. Contributor address:	City Sta	te Z	IP Code	\$100.00		
	2525 S Lamar Blvd 304 Austin, TX	78704-4789		T	·		
		·			(if travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PA	\C		7. Amount of	8. In-kind contribution •	
09/24/2014	Molly Shannon	. —			contribution	description (if applicable)	
	6. Contributor address:	City Sta	te Z	IP Code	\$10.00		
	703 Kinney Ave Austin, TX 78704	-1434				·	
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction	5)	
4. Date	5. Full name of contributor	out-of-state P/	AC .		7. Amount of	8. In-kind contribution	
09/24/2014	Elaine Shapiro				contribution	description (if applicable)	
	6. Contributor address:	City Sta	te Z	IP Code	\$250.00		
	1305 Silver Hill Dr Austin, TX 787	746-7424					
					(if travel outside o	Texas, complete Schedule T)	
Principal occu     Retired	pation / Job title (See Instructions	5)		I	oyer (See Instruction Ione	s)	
4. Date	5. Full name of contributor	out-of-state P	4C		7. Amount of	8. In-kind contribution	
07/1 <b>7/2</b> 014	Michael Shapiro				contribution	description (if applicable)	
	6. Contributor address:	City Sta	ite Z	IP Code	\$200.00		
!	3611 Pinnacle Rd Austin, TX 7874	6-7416					
					(if travel outside o	Texas, complete Schedule T)	
	pation / Job title (See Instruction:	s)	-	1	oyer (See Instruction	•	
Physician				P	ulminary and Critical (	Care	

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### SCHEDULE A

The !	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor ~	out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/24/2014	Morris Shapiro	_	_		contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$250.00		
	1305 Silver Hill Dr Austin, TX 78	746-7424					
					(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)     10 Employ					oyer (See Instruction	s)	
Retired				. N	one		
4. Date	Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution description (if applicable)	
09/25/2014	Phyllis Shapiro III				contribution \$250.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$230.00		
	42 Sundown Pkwy Austin, TX 787	46-5258					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instruction	s)	-	10 Emple	oyer (See Instruction	s)	
Retired				N	one		
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Robert Shapiro			~	contribution	description (if applicable)	
·	6. Contributor address:	City	State	ZIP Code	\$250.00	·	
	  42 Sundown Pkwy Austin, TX 787	746-5258				, · · · · .	
	•				(if travel outside o	Texas, complete Schedule T)	
1	pation / Job title (See Instruction	ıs)			oyer (See Instruction	·	
Scrap Metal	Recycling			A	ustin Metal & Iron Co		
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
07/17/2014	Sarah E Shapiro				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$75.00		
	1209 Fieldcrest Dr Austin, TX 787	704-5343					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Empl	oyer (See Instruction	s)	

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### SCHEDULE A

The	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Lynn Sherman	_			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	PO Box 5605 Austin, TX 78763-56	505					
		•			(if travel outside o	Texas, complete Schedule T)	
Principal occu     Attorney	pation / Job title (See Instruction:	s)		1	oyer (See Instruction elf	s)	
4 Date	5. Full name of contributor	Out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
09/18/2014	James Shieh	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	2901 Windsor Rd Austin, TX 7870	3-2345					
					(if travel outside o	f Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)     10 Emp				10 Empl	oyer (See Instruction		
Designer	· .			J	Square Architecture Ll	LC	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Cord Shiflet				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	65 Pascal Ln Austin, TX 78746-25	29					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	
Realtor	·			S	elf		
4. Date	5. Full name of contributor'	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
09/25/2014	Steve Shook				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$200.00		
	6836 Austin Center Blvd Ste 245 A	Austin, TX 7	78731-3193	3		,-	
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	
Certified Pul	blic Accountant			S	elf		

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## SCHEDULE A

The	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler					hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
08/06/2014	Chris Shrout	_			contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$25.00		
	904 Post Oak St Unit B Austin, TX	78704-164	12				
				_	(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Empl	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	state PAC _	·	7. Amount of	8. In-kind contribution	
09/25/2014	Liz Sibley				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
	98 San Jacinto Blvd Austin, TX 78	3701-4082					
	-				(if travel outside o	f Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	is)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	. Out-of-s	state PAC		7. Amount of	8. In-kind contribution	
08/26/2014	Shawn Sides				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	3010 E 14th 1/2 St Austin, TX 787	702-1602					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	Out-of-s	state PAC	•	7. Amount of	8. In-kind contribution	
07/24/2014	Carol Silverberg	_	-		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	5501 Cuesta Verde Austin, TX 78	746-1533			(		
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	s)	
Homemaker				, N	lone		

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## SCHEDULE A

Th	e Instruction Guide explains how	Total pages Schedule A:     209				
2. FILER NAM	E Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	oul-of-st	ate PAC		7. Amount of	8. In-kind contribution
07/24/2014	Kaylen Silverberg				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	5501 Cuesta Verde Austin, TX 78	746-1533				
					(if travel outside o	Texas, complete Schedule T)
9. Principal oc	cupation / Job title (See Instruction	ns)		10 Emple	oyer (See Instruction	s)
Physician				r	exas Fertility Center	
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)
09/15/2014	Marcia Silverberg				\$50.00	description (ii applicable)
	Contributor address:	City	State	ZIP Code	330.00	
	4905 Raffee Cv Austin, TX 78731	-1130				
					(if travel outside o	Texas, complete Schedule T)
9. Principal oc	cupation / Job title (See Instruction	ıs)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution
09/25/2014	Elliot Silverstone				contribution	description (if applicable)
ı	6. Contributor address:	City	State	ZIP Code	\$50.00	
	7100 Spurlock Dr Austin, TX 787	31-2135				
					(if travel outside o	Texas, complete Schedule T)
9. Principal oc	cupation / Job title (See Instruction	ns)		10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-st	tate PAC	<u> </u>	7. Amount of	8. In-kind contribution
07/25/2014	Leya Simmons Samiloglu				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	,
	2302 Cheswick Ct Austin, TX 78	746-1934				
				•	(if travel outside o	Texas, complete Schedule T)
	cupation / Job title (See Instruction	ns)		1	oyer (See Instruction	s)
Yoga Tead	cher			S	elf	

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## **SCHEDULE A**

The	Instruction Guide explains how to	complete this form	l.	1. Total pages Sche		
				209		
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/09/2014	Amy Simmons	(		contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$350.00		
×	3111 Glenview Ave Austin, TX 78	703-1442				
	· 			(if travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)				10 Employer (See Instructions)		
Founder	· · · · · · · · · · · · · · · · · · ·		A	my's Ice Creams	,	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/03/2014	Dudley Simmons			contribution \$350.00	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$550.00		
	2412 Jarratt Ave Austin, TX 78703	-2431				
				(if travel outside o	Texas, complete Schedule T)	
<ol><li>Principal occuj</li></ol>	pation / Job title (See Instructions	5)	10 Empl	oyer (See Instruction	s)	
Real Estate			A	rgyle Residential		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/22/2014	Steve Simmons			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$350.00		
	PO Box 160234 Austin, TX 78716-	-0234				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		oyer (See Instruction	s)	
Owner			A	my's Ice Creams		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
07/23/ <b>2</b> 014	Mike Slover			contribution \$350.00	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	3330.00		
	1899 Westlake Dr Unit A Austin, T	X 78746-3717		``		
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)	10 Empl	oyer (See Instruction	s)	
Retired			N	lone		

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## SCHEDULE A

The I	The Instruction Guide explains how to complete this form.						Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler					3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC			7. Amount of	8. In-kind contribution	
09/24/2014	Susan Smith Turrieta		_			contribution	description (if applicable)	
·	6. Contributor address:	City	State	ZIP	Code	\$200.00		
	PO Box 5902 Austin, TX 78763-59	02						
						(if travel outside or	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10 Emplo						yer (See Instruction	s)	
Professional	Engineer				St	mith Turrieta Engineer	ing .	
4. Date	5. Full name of contributor	out-of-s	tate PAC _			7. Amount of contribution	8. In-kind contribution description (if applicable)	
07/21/2014	Barry S Smith					\$350.00		
	Contributor address:	City	State	ZIP	Code	350.00		
	809 Kinney Ave Austin, TX 78704-	-1436						
_						(if travel outside o	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10 Empl					10 Emplo	oyer (See Instruction	s)	
Geophysicist					, T	hree Rivers Operation	Co.	
4. Date	5. Full name of contributor	out-of-s	tate PAC			7. Amount of	8. In-kind contribution	
09/25/2014	Hank Smith		_			contribution	description (if applicable)	
	Contributor address:	City	State	ZIF	Code	\$100.00		
	2801 Bear Springs Trl Austin, TX 7	78748-1059	)					
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)		1	10 Emplo	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	state PAC _			7. Amount of	8. In-kind contribution	
09/24/2014	Jeff Smith					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIF	Code	\$25.00		
	906 Rio Grande St Austin, TX 7870	01-2222						
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)			10 Emplo	oyer (See Instruction	s)	
				,				

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## **SCHEDULE A**

The I	Instruction Guide explains how to	complete this form	) <b>.</b>	Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC			8. In-kind contribution
09/17/2014	Jerry Smith	_			description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	9721 Rias Way Austin, TX 78717-39	998			
				(if travel outside of	Texas, complete Schedule T)
•	pation / Job title (See Instructions)	)	I	oyer (See Instruction	5)
Real Estate A	gent		Se Se	elf	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Keith Smith				description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	PO Box 162404 Austin, TX 78716-2	2404			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occuj	pation / Job title (See Instructions)	)	10 Emple	oyer (See Instruction	S)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/21/2014	Laura A Smith			contribution	description (if applicable)
	Contributor address:	City State	ZIP Code	\$350.00	
	809 Kinney Ave Austin, TX 78704-	1436			
	·			(if travel outside o	Texas, complete Schedule T)
9. Principal occu None	pation / Job title (See Instructions)	)		oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/23/2014	Patti Smith			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	2808 Montebello Rd Unit 9 Austin,	TX 78746-6802			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	)	10 Empl	oyer (See Instruction	s)

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## SCHEDULE A

The	nstruction Guide explains how to	complete	this form	ı.		Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler			<u>-</u>		3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tate PAC			7. Amount of	8. In-kind contribution
09/15/2014	Sherry Smith	_	_			contribution	description (if applicable)
	Contributor address:	City	State	ZIP	Code	\$350.00	
	2512 Wooldridge Dr Austin, TX 78	3703-2536					
						(if travel outside of	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	s) .		1	0 Emplo	oyer (See Instruction:	s)
Retired					N-	one	
4. Date	5. Full name of contributor	Oul-of-s	tate PAC			7. Amount of	8. In-kind contribution
09/16/2014	Theron Smith					contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP	Code	\$50.00	
	7107 Via Dono Dr Austin, TX 787	49-2764					
						(if travel outside o	Texas, complete Schedule T)
9. Principal occup	Principal occupation / Job title (See Instructions)				0 Emplo	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	state PAC _			7. Amount of contribution	8. In-kind contribution description (if applicable)
09/23/2014	Andre Smullen					\$100.00	description (if applicable)
	6. Contributor address:	City	State	ZIP	Code	\$100.00	
	7209 Mesa Dr Austin, TX 78731-2	103					
						(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		1	0 Emplo	oyer (See Instruction	s)
		<del></del>	<del></del>		·		
4. Date	5. Full name of contributor	Out-of-s	state PAC _			7. Amount of contribution	In-kind contribution description (if applicable)
07/11/2014	Karen Sonleitner					\$350.00	description (ii applicable)
	Contributor address:	City	State	ZIP	Code	\$350.00	
	1712 Pasadena Dr Austin, TX 7875	57-1842					
						(if travel outside o	Texas, complete Schedule T)
•	pation / Job title (See Instruction	s)		1	0 Emplo	oyer (See Instruction	s)
Auditor's Off	ïce				Travis County		

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## **SCHEDULE A**

The	nstruction Guide explains how to	Total pages Schedule A:     209					
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-sta	ate PAC _		7. Amount of	8. In-kind contribution	
09/24/2014	Christopher Soukup				contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$350.00		
	2505 Enfield Rd Apt 1 Austin, TX	78703-3739					
				•	(if travel outside of	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10 Emplo					oyer (See Instruction		
President				C	ommunication Service	for the Deaf	
4. Date	Full name of contributor	out-of-sta	ate PAC _		7. Amount of contribution	In-kind contribution description (if applicable)	
09/15/2014	Helen C Spear				\$100.00	description (ii applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	4200 Jackson Ave Apt 5005 Austir	, TX 78731-	6068				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s) .		10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-sta	ate PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Scott Specht				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$25.00		
	1314 Rosewood Ave Apt 103 Aust	in, TX 78702	2-2050				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of	8. In-kind contribution	
09/21/2014	Mary Spence				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00	,	
	403 Lake Cliff Trl Austin, TX 7874	46-4681					
	<u> </u>				(if travel outside o	Texas, complete Schedule T)	
1	pation / Job title (See Instruction	s)		l.	oyer (See Instruction	s)	
None				N	lone		

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## **SCHEDULE A**

The	Instruction Guide explains how t	Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
09/16/2014	Roy M Spence				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	403 Lake Cliff Trl Austin, TX 787	46-4681		,		
					(if travel outside o	Texas, complete Schedule T)
					oyer (See Instruction SD&M	s)
4. Date	5. Full name of contributor		546		7. Amount of	8. In-kind contribution
07/01/2014	Robyn Sperling	oui-oi-s	tate PAC _		contribution	description (if applicable)
07/01/2014		0:4	01-1-	71D 01-	\$350.00	
	6. Contributor address:	City	State	ZIP Code		
	3993 Westlake Dr Austin, TX 787	46-1622				
		<u> </u>				Texas, complete Schedule T)
9. Principal occu Retired	pation / Job title (See Instruction	ns)		,	oyer (See Instruction one	s)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
08/14/2014	Dede Spontak				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
	2103 Bluebonnet Ln Austin, TX 7	8704-4022				
•					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	aut-of-s	state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Katherine Staat				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$25.00	
	2606 White Horse Trl Austin, TX	78757-2747				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)		10 Empl	oyer (See Instruction	s)

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### SCHEDULE A

The	—			1. Total pages Sch	edule A:	
i ne	Instruction Guide explains how to	complete this form	l, 	209	209	
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	Full name of contributor	ut-of-state PAC		7. Amount of	8. In-kind contribution	
09/10/2014	Marilyn Stahl			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$75.00		
	3702 Terrina St Apt 9 Austin, TX 7	78759-8758			·	
			•	(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	10 Empl	10 Employer (See Instructions)			
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/09/2014	Marion Stahl			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$75.00		
	3702 Terrina St Apt 9 Austin, TX	78759-8758				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/21/2014	James P Stansberry			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
	98 San Jacinto Blvd Unit 803 Aust	in, TX 78701-4082	ř.			
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s) .	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/21/2014	Julie Stansberry			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
	98 San Jacinto Blvd Austin, TX 78	701-4082				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)	10 Emp	oyer (See Instruction	s)	
· .						

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### SCHEDULE A

The	Instruction Guide explains how t	1	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler			-		hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Scott Starrett		_		contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$5.00	
	111 W 55th St Austin, TX 78751-1	1203				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ıs)	•	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/25/2014	David Stauch		_		contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$250.00	
		•	Otato	211 0000		
	901 S Mo Pac Expy Austin, TX 78	3740-3770				7
Q Principal occur	pation / Job title (See Instruction	)c)		10 Empl	loyer (See Instruction	Texas, complete Schedule T)
Managing Pr	·	13)		1	Capital Project Manager	
4. Date	5. Full name of contributor	Dout-of-s	state PAC	•	7. Amount of	8. In-kind contribution
07/16/2014	William Steakley		_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$125.00	
	317 W 3rd St Austin, TX 78701-38	815		•		
	or word or rushin, 170 10701 St	015			(if traval outside o	Texas, complete Schedule T)
9 Principal occu	Lpation / Job title (See Instruction	15)		10 Emp	loyer (See Instruction	<u> </u>
o. Trinoipai occu		,		10 2		•,
4. Date	5. Full name of contributor	Out-of-s	state PAC	•	7. Amount of	8. In-kind contribution
07/24/2014	Ryan M Steed	_	-		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	
	54 Rainey St Apt 1107 Austin, TX	78701-439	8			
	,,,,		-	T.	(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ns)	-	10 Emp	loyer (See Instruction	1 <u> </u>
	, , , , , , , , , , , , , , , , , , ,		•			

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## **SCHEDULE A**

The I	nstruction Guide explains how to	Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler		-		3. ACCOUNT # (Eti	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC			7. Amount of	8. In-kind contribution
09/20/2014	Anh N Steimel	_			contribution	description (if applicable)
	6. Contributor address:	City State	ZII	P Code	\$50.00	
	3905 Edgerock Dr Austin, TX 7873	1-1426				
					(if travel outside of	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	)		10 Emplo	oyer (See Instruction	5)
4. Date	5. Full name of contributor	out-of-state PAC			7. Amount of	8. In-kind contribution
09/20/2014	Eric Steimel				contribution	description (if applicable)
	6. Contributor address:	City State	<b>7</b> 11	P Code	\$50.00	
•		•		0000	1	
	3905 Edgerock Dr Austin, TX 7873	1-1426			er i e i e i e i e i e i e i e i e i e i	7
Q. Principal acquir	Loation / Job title (See Instructions	<u>-</u>		10 Emple	<u> </u>	Texas, complete Schedule T)
9. Principal occup	pation 7 Job title (See instructions	)		io Empi	oyer (See Instruction	
4. Date	5. Full name of contributor	out-of-state PAC			7. Amount of	8. In-kind contribution
09/22/2014	Eric Stein	_			contribution	description (if applicable)
	6. Contributor address:	City State	ZI	P Code	\$350.00	
	6112 Highland Hills Dr Austin, TX	78731-4102				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	)		_	oyer (See Instruction	s)
Financial Ser	vices	· · · · · · · · · · · · · · · · · · ·		R	yan, LLC	
4. Date	Full name of contributor	out-of-state PAC			7 Amount of	8. In-kind contribution
09/22/2014	Shari Stein				contribution	description (if applicable)
	6. Contributor address:	City State	ZI	P Code	\$350.00	
	6112 Highland Hills Dr Austin, TX	78731-4102				
					(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	)		10 Employer (See Instructions)		
Secretary				Sharmon Ent		

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### SCHEDULE A

The I	nstruction Guide explains how to	Total pages Schedule A:     209						
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	5. Full name of contributor	Out-of-st	ate PAC		7. Amount of	8. In-kind contribution		
07/19/2014	Philip L. Sterzing	_		_	contribution	description (if applicable)		
	Contributor address:	City	State	ZIP Code	\$100.00			
•	1407 W 51st St Austin, TX 78756-2	2607						
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	Principal occupation / Job title (See Instructions)					10 Employer (See Instructions)		
4. Date	5. Full name of contributor	out-of-st	late PAC		7. Amount of	8. In-kind contribution		
09/23/2014	Grace Stewart	<u> </u>	· <u> </u>		contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$350.00			
	6801 Valburn Dr Austin, TX 78731	•						
	OSOT VAIDUITI DI AUSTII, IA 78731	-1003			200			
Principal occupation / Job title (See Instructions)					Loyer (See Instruction	Texas, complete Schedule T)		
Student	pation 7 300 title (Gee matractions	•) 			Vone	<b>.</b>		
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution		
09/17/2014	Jimmy Stewart				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$250.00			
	   2812 Kinney Oaks Ct Austin, TX 7	8704-4978						
			`		(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	5)		10 Emp	loyer (See Instruction	s) .		
Owner	<del></del>			I	Do512			
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution		
09/1 <b>7/2</b> 014	Skyler Bentsen Stewart				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$250.00			
	2812 Kinney Oaks Ct Austin, TX 7	8704-4978						
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	5)		10 Emp	loyer (See Instruction	s)		
Homemaker				1	None			

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## **SCHEDULE A**

	<del></del>				· · · · · · · · · · · · · · · · · · ·	
The	Instruction Guide explains how to	complete this form		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/03/2014	Michael Stoff			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$50.00	¥	
	   5906 Upvalley Run Austin, TX 787	/31-3669				
·				(if travel outside or	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)	10 Emplo	oyer (See Instructions	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/21/2014	Doyle J. Stout			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$350.00		
	810 W Mary St Austin, TX 78704-4	4140			,	
				(if travel outside of	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s) .	10 Emple	oyer (See Instruction	s)	
Designer			P	entagram		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/27/2014	Susan Strausberg			contribution	description (if applicable)	
	6. Contributor address:	City - State	ZIP Code	\$350.00		
	603 Hurst Creek Rd Lakeway, TX	78734-2564				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)	10 Empl	oyer (See Instruction	s)	
Chief Execut	ive Officer		9	W Search		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Christi Strmiska			contribution \$350.00	description (if applicable)	
	Contributor address:	City State	ZIP Code	\$330.00		
	9000 Marly Cv Austin, TX 78733-	3281		1		
	<u></u>			(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	5)	10 Empl	oyer (See Instruction	s)	
Homemaker			N	Ione		

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## **SCHEDULE A**

The I	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-st	tate PAC		7. Amount of contribution	In-kind contribution description (if applicable)	
07/23/2014	Mary L Stroud				\$350.00	description (ii applicable)	
	6. Contributor address:	City	State	ZIP Code	\$550.00		
	9306 Great Hills Trl Unit 90 Austin	, TX 78759	-7127				
					`	Texas, complete Schedule T)	
•					oloyer (See Instruction	s)	
Retired					None		
4. Date	5. Full name of contributor	Out-of-s	tate PAC _		7. Amount of contribution	In-kind contribution description (if applicable)	
09/17/2014	David Strutton				\$350.00		
	6. Contributor address:	City	State	ZIP Code		•	
	16109 Braesgate Dr Austin, TX 787	717-4820					
						Texas, complete Schedule T)	
	pation / Job title (See Instructions	s)			loyer (See Instruction	•	
Chief Execut	ive Officer				Baker-Aicklen Associate	es Inc.	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)	
09/25/2014	Donald Stuart				\$50.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	350.00		
	4105 Long Champ Dr Austin, TX 7	8746-11 <b>5</b> 0					
	,				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Em	ployer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	tate PAC	<del>-</del> -	7. Amount of	8. In-kind contribution	
09/25/2014	Loraine Stuart				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
	4105 Long Champ Dr Austin, TX 7	78746-1150				:	
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)	_	10 Em	oloyer (See Instruction	s)	

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## SCHEDULE A

The	Instruction Guide explains how to	o complete this form	).	1. Total pages Scho	
2. FILER NAME	Stephen Adler				hics Commission Filers)
<ul><li>4. Date</li><li>09/04/2014</li><li>9. Principal occi</li><li>4. Date</li><li>08/03/2014</li></ul>	5. Full name of contributor  Andre Suissa 6. Contributor address:  603 Davis St Apt 1406 Austin, TX  upation / Job title (See Instruction  5. Full name of contributor  James Susman 6. Contributor address:	·	ZIP Code	7. Amount of contribution \$54.00  (if travel outside o oyer (See Instruction 7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)  Texas, complete Schedule T) s)  8. In-kind contribution description (if applicable)
Principal occi     Architect	2108 Lakeshore Dr Austin, TX 78' upation / Job title (See Instruction		I	(if travel outside o oyer (See Instruction TG Design	Texas, complete Schedule T)
4. Date 09/22/2014	<ul><li>5. Full name of contributor</li><li>Gary Susswein</li><li>6. Contributor address:</li><li>3902 Silverspring Dr Austin, TX 7</li></ul>	Out-of-state PAC City State	ZIP Code	7. Amount of contribution \$175.00	In-kind contribution description (if applicable)  Texas, complete Schedule T)
9. Principal occ	upation / Job title (See Instruction	os)	10 Empl	loyer (See Instruction	s)
4. Date 07/02/2014	<ul><li>5. Full name of contributor</li><li>Charles Swail</li><li>6. Contributor address:</li><li>1214 Barton Hills Dr Apt 204 Aus</li></ul>		ZIP Code	7. Amount of contribution \$25.00	In-kind contribution description (if applicable)     Texas, complete Schedule T)
9. Principal occ	upation / Job title (See Instruction	ns)	10 Empl	loyer (See Instruction	s)

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## **SCHEDULE A**

The	Instruction Guide explains how to	·	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution
09/25/2014	Robert Swanson					description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$100.00	
	6904 Ardath St Austin, TX 78757-2	2319				
					(if travel outside o	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)				10 Emplo	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of	8. In-kind contribution
09/25/2014	Janet Taborn				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$25.00	
	4014 Travis Country Cir Austin, TX	X 78735-602	29			
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	S)		10 Emplo	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-st	late PAC _		7. Amount of	8. In-kind contribution
09/22/2014	Richard Tagle				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	11206 Tanya Trl Austin, TX 78726	-1327				
-					(if travel outside o	Texas, complete Schedule T)
Principal occu     Chief Execut	pation / Job title (See Instructions	3)	· '' -		oyer (See Instruction ndy Roddick Foundati	·
4. Date	5. Full name of contributor		tate PAC	\	7. Amount of	8. In-kind contribution
09/25/2014	Latifah Taormina		IAIE FAC _		contribution	description (if applicable)
0212071	6. Contributor address:	City	State	ZIP Code	\$50.00	
	9509 Ketona Cv Austin, TX 78759	•	2.310	5000		
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	s)	•	10 Empl	oyer (See Instruction	<del>                                     </del>
·	•					

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## **SCHEDULE A**

The	Instruction Guide explains how to	complete thi	is form.		· -	Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler			•	3. ACCOUNT # (Eti	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state	PAC			8. In-kind contribution	
09/22/2014	Tanya Tarr	_	•		contribution	description (if applicable)	
	6. Contributor address:	City S	State 2	ZIP Code	\$100.00	•	
	5102 Delores Ave Austin, TX 7872	1-2110					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions)				10 Emplo	oyer (See Instructions	s)	
4. Date	5. Full name of contributor	Out-of-state	PAC		7. Amount of	8. In-kind contribution	
09/11/2014	Kerry Tate				contribution	description (if applicable)	
	Contributor address:	City S	State 2	ZIP Code	\$50.00		
	12140 Tunnel Trl Manchaca, TX 7	8652-3828					
					(if travel outside of	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Emplo	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Ingrid Taylor				contribution	description (if applicable)	
	6. Contributor address:	City S	State	ZIP Code	\$350.00		
	2201 Woodmont Ave Austin, TX 7	8703-3253					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu Project Man	upation / Job title (See Instruction: ager	s)	_		Employer (See Instructions) University of Texas		
4. Date	5. Full name of contributor	oul-of-state	PAC		7. Amount of	8. In-kind contribution	
09/25/2014	James Taylor				contribution	description (if applicable)	
	6. Contributor address:	City S	State	ZIP Code	\$350.00		
,	2201 Woodmont Ave Ste 450 Aust	in, TX 78703-	3253				
					(if travel outside o	Texas, complete Schedule T)	
•	upation / Job title (See Instruction	s)		· ·	oyer (See Instruction	s)	
Owner				V	Vianovo, LP		

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## SCHEDULE A

´ The	Instruction Guide explains how to		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler			3. ACCOUNT#(Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/24/2014	John Taylor	<u> </u>		contribution	description (if applicable)
	Contributor address:	City State	ZIP Code	\$350.00	
;	4212 Avenue F Austin, TX 78751-3	3721			. '
				(if travel outside o	Texas, complete Schedule T)
Principal occu     Retired	9. Principal occupation / Job title (See Instructions) 10 E Retired				s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Kimberly Taylor	_		contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	3605 Pinnacle Rd Austin, TX 7874	6-7416			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions	5)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/24/2014	Dina Tebcherany			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	,
,	4517 Grand Cypress Dr Austin, TX	78747-1329			
				(if travel outside o	Texas, complete Schedule T)
<ol> <li>Principal occu</li> <li>Physician</li> </ol>	pation / Job title (See Instructions	5)	· · · · · · · · · · · · · · · · · · ·	oyer (See Instruction exas Oncology	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/05/2014	Lawrence E Temple		-	contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$350.00	
	400 W 15th St Ste 1510 Austin, TX	78701-1648			
		<u> </u>		(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	5)	· ·	oyer (See Instruction	·
Attorney		,	T	exas Workforce Comn	nission

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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## SCHEDULE A

The	Instruction Guide explains how to	complete this form	).	Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Stephanie Тегга			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$5.00		
	2215 Town Lake Cir Apt 227 Austi	n, TX 78741-3081				
<u>.                                    </u>				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	3)	10 Emple	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
08/13/2014	Alexis Tessler			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$75.00		
	   1019 E Riverside Dr # 3 Austin, TX	C 78704				
-	1			(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)	10 Emple	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/24/2014	Stuart Thomajan			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$350.00		
,	5000 Bee Caves Rd Ste 106 West L	ake Hills, TX 78746	-5254		` ````````````````````````````````````	
				(if travel outside o	Texas, complete Schedule T)	
Principal occu     Founder	pation / Job title (See Instructions	5)	1	oyer (See Instruction he Chameleon Group	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/10/2014	Harry Thomas			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$350.00		
	606 W Lynn St Apt 10 Austin, TX	78703-4759				
` .			<u> </u>	(if travel outside o	Texas, complete Schedule T)	
•	pation / Job title (See Instructions	5)		oyer (See Instruction	s)	
Physician				Scott & White Clinic		

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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## SCHEDULE A

The	Instruction Guide explains how to	complete this	form.		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler	·				nics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state P/	4C		7. Amount of	8. In-kind contribution	
09/24/2014	Steven Tipton					description (if applicable)	
	6. Contributor address:	City Sta	ite Zi	⊃ Code	\$100.00		
,	5411 Tortuga Trl Austin, TX 7873	1-4535					
					(if travel outside of	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)		10 Emplo	oyer (See Instructions	3)	
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of	8. In-kind contribution	
09/08/2014	Omar Tiwana					description (if applicable)	
•	6. Contributor address:	City Sta	ate ZI	P Code	\$350.00		
	1604A Southgate Cir Austin, TX 78	8704-7747					
					(if travel outside o	Texas, complete Schedule T)	
Principal occu     Retired	pation / Job title (See Instructions	s)		•	oyer (See Instructions one	5)	
	1		-	.,,	· · · · · · · · · · · · · · · · · · ·		
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of contribution	In-kind contribution description (if applicable)	
08/26/2014	Jared Toren				\$350.00		
	6. Contributor address:	City Sta	ate Zi	P Code			
	4932 Tiger Lily Way Austin, TX 7	8739-1430					
					(if travel outside o	Texas, complete Schedule T)	
Principal occu     Financial Ad	pation / Job title (See Instruction: lvisor	s)		•	byer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state P	AC		7. Amount of	8. In-kind contribution	
07/01/2014	Lambeth Townsend				contribution	description (if applicable)	
	6. Contributor address:	City Sta	ate Zi	P Code	\$350.00		
	1408 Hartford Rd Austin, TX 7870	3-3925					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	
Attorney				L	loyd Gosselink Rochel	le & Townsend, P.C.	

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## **SCHEDULE A**

The	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler		<del>-</del>		3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution		
08/06/2014	Drew Treybig	_	_		contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$250.00			
	10915 Bee Caves Rd. Austin, TX 78	8733				•		
					(if travel outside or	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	;)		10 Empl	oyer (See Instructions	s)		
Independent	Education Management Professional			S	elf			
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of contribution	In-kind contribution description (if applicable)		
08/06/2014	Jimmy Treybig				\$250.00			
`	6. Contributor address:	City	State	ZIP Code				
	10915 Bee Caves Rd. Austin, TX 78	8733						
					(if travel outside of	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction:	s)		
Venture Capi	tal			S	elf			
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution		
09/24/2014	Paul J Trimble	_			contribution	description (if applicable)		
	Contributor address:	City	State	ZIP Code	\$50.00			
	5233 Tortuga Trl Austin, TX 78731	-4501						
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction	s)		
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution		
09/25/2014	Suzanne Trimble			•	contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$50.00			
	5233 Tortuga Trl Austin, TX 78731	-4501		•				
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instructions	5)		10 Empl	loyer (See Instruction	s)		

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## SCHEDULE A

The	The Instruction Guide explains how to complete this form.					Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler					3. ACCOUNT # (Eti	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-st	ate PAC _			7. Amount of	In-kind contribution	
09/25/2014	Kay Trostle					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP C	Code	\$100.00		
	1821 Far Gallant Dr Austin, TX 78	746-1810						
						(if travel outside of	Texas, complete Schedule T)	
9. Principal occuj	pation / Job title (See Instructions	s)		10	Emplo	oyer (See Instructions	s)	
4. Date	5. Full name of contributor	out-of-st	ate PAC				8. In-kind contribution	
09/25/2014	Steve Tucker	_	_			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP C	Code	\$250.00		
	3717 Allegro Lugar St Austin, TX	78749-1503					4	
	<b>5</b>					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s) .		10	Emplo	oyer (See Instruction	s)	
Real Estate					St	teve Tucker Company		
4. Date	5. Full name of contributor	out-of-st	ate PAC _			7. Amount of	8. In-kind contribution	
09/25/2014	Kevin Tuerff					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP C	Code	\$250.00		
	101 Colorado St Apt 2304 Austin,	TX 78701-4	140					
,	·					(if travel outside o	Texas, complete Schedule T)	
Principal occu     President	pation / Job title (See Instructions	s)		10		(if travel outside of Texas, complete Schedule T) loyer (See Instructions) Tuerff-Davis Enviromedia		
4. Date	5. Full name of contributor	out-of-si	tate PAC			7. Amount of	8. In-kind contribution	
07/24/2014	Claire Turner	_				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP (	Code	\$350.00		
	1899 Westlake Dr Unit A Austin, T	X 78746-3	717					
	·					(if travel outside o	Texas, complete Schedule T)	
· '	pation / Job title (See Instruction:	s)		10		oyer (See Instruction	s)	
Retired					N	one		

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### SCHEDULE A

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The I	nstruction Guide explains how to	complete	this form	,	' =	Total pages Schedule A:		
				· · · · · · · · · · · · · · · · · · ·	209			
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	5. Full name of contributor	Out-of-s	tate PAC _		7. Amount of	8. In-kind contribution		
09/10/2014	Ian Turpin				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$350.00			
	114 W 7th St Ste 900 Austin, TX 78	3701-3013						
					(if travel outside o	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)				10 Emp	Employer (See Instructions)			
President					LBJ Family Wealth Adv	isors		
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)		
08/21/2014	Nicole Tuttle				\$350.00	,		
	Contributor address:	City	State	ZIP Code	3330.00	•		
	608 Baylor St Austin, TX 78703-53	25						
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions) 10 Em				oloyer (See Instruction	s)			
Homemaker	·				Self			
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution		
08/21/2014	Tyson Tuttle			•	contribution	description (if applicable)		
	Contributor address:	City	State	ZIP Code	\$350.00			
	608 Baylor St Austin, TX 78703-53	25						
					(if travel outside o	Texas, complete Schedule T)		
1	pation / Job title (See Instructions	s)			oloyer (See Instruction	s)		
Chief Execut	ive Officer				Silicon Labs			
4. Date	Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution		
09/15/2014	Anita Vadgama				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	~\$350.00			
	5904 Cape Coral Dr Austin, TX 78	746-7 <b>2</b> 68						
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occup	pation / Job title (See Instructions	s)		10 Emp	oloyer (See Instruction	s)		
Pharmaceutic	eals				Self			

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## SCHEDULE A

The	Instruction Guide explains how to		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution
09/1 <b>5/2</b> 014	Ashok G Vadgama				contribution	description (if applicable)
,	6. Contributor address:	City	State	ZIP Code	\$350.00	
	5904 Cape Coral Dr Austin, TX 78	746-7268			,	
	·				(if travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)     10 Emple					oyer (See Instruction	s)
President				С	AM-1	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of contribution	In-kind contribution description (if applicable)
09/16/2014	Kathleen M Vale				\$150.00	description (ii applicable)
	6. Contributor address:	City	State	ZIP Code	\$150.00	
	2702 Dupoint Cv Austin, TX 7874	8-5154				
	•				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution
09/22/2014	William Van Pelt				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	
	l 1206 Tanya Trl Austin, TX 78726	5-1327				
					(if travel outside o	Texas, complete Schedule T)
•	ipation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)
Chief Execu	tive Officer			H	leartgift Foundation	
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)
09/02/2014	Peter Van Zandt				\$200.00	description (ii applicable)
	Contributor address:	City	State	ZIP Code	3200.00	
	2905 Bonnie Rd Austin, TX 78703	3-2805		•	1	`
	, `				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	ıs)		1	oyer (See Instruction	s)
Consultant				C	Cooper Zietz Engineers	·

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## SCHEDULE A

The	Instruction Guide explains how to complete this for	m.	`\	Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributorout-of-state PAC				8. In-kind contribution
08/25/2014	Stace VanderStek			contribution	description (if applicable)
	6. Contributor address: City State	ZIP C	Code	\$25.00	
	9226 Jollyville Rd Apt 164 Austin, TX 78759				
				(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)	10	Emplo	oyer (See Instruction	5)
4. Date	5. Full name of contributor Out-of-state PAC			7. Amount of	8. In-kind contribution
09/09/2014	Laurie Vanhoose			contribution	description (if applicable)
	6. Contributor address: City State	ZIP	Code	\$50.00	
	4707 Sylvandale Dr Austin, TX 78745-1739	1			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)	10	Emplo	oyer (See Instruction	5)
4. Date	5. Full name of contributor out-of-state PAC			7. Amount of	8. In-kind contribution
07/17/2014	Jackie Vargas			contribution	description (if applicable)
,	6. Contributor address: City State	ZIP (	Code	\$50.00	
	5604 Southwest Pkwy Apt 2018 Austin, TX 78735-62	53		:	
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)	10	Emple	oyer (See Instruction	s)
4. Date	5. Full name of contributor out-of-state PAC			7. Amount of	8. In-kind contribution
09/10/2014	Lesley Varghese			contribution	description (if applicable)
,	6. Contributor address: City State	ZIP (	Code	\$350.00	,
	1510 W 6th St Apt 205 Austin, TX 78703-5102				w <sub>e</sub> v <sub>q</sub>
,				(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instructions)	10	Empl	oyer (See Instruction	s)
Attorney	· ·		Α	sian American Resour	ce Center

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### **SCHEDULE A**

The I	nstruction Guide explains how to		Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler			-	3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-si	tate PAC		7. Amount of	8. In-kind contribution	
09/08/2014	Philip Varghese				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	2606 Woodmont Ave Austin, TX 7	78703-3259					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instruction	s)		10 Em	ployer (See Instruction	s)	
Professor				l	The University of Texas	at Austin	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)	
09/16/2014	Nathan Vargo	,			\$350.00	description (ii applicable)	
	6. Contributor address:	City	State	ZIP Code			
	16417 Castletroy Dr Austin, TX 78	8717-5523					
-					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instruction	is)		10 Em	ployer (See Instruction	s)	
Director of D	evelopment				Land Development and Construction		
4. Date	5. Full name of contributor	out-of-s	tate PAC _		7. Amount of	8. In-kind contribution	
09/15/2014	Summer Vargo				contribution \$350.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code			
	16417 Castletroy Dr Austin, TX 78	8717-5523					
	· ,				(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instruction	ns)		10 Em	ployer (See Instruction	os)	
Teacher					Aveda		
4. Date	5. Full name of contributor	oul-of-s	state PAC _		7. Amount of	8. In-kind contribution	
07/15/2014	James C. Vaughan				contribution \$350.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code		4	
·	2403 Sweetbrush Dr Austin, TX 7	8703-1521					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instruction	ns)		10 En	nployer (See Instruction	ns)	
Investor					Self		

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## SCHEDULE A

The	Instruction Guide explains how to	Total pages Schedule A:     209					
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	ACCOUNT # (Ethics Commission Filers)	
4. Date	5. Full name of contributor	out-of-st	tate PAC		7. Amount of	8. In-kind contribution	
09/24/2014	Susan Veintemillas	_	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	3200 Barton Point Dr Austin, TX 78						
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)		10 Emplo	oyer (See Instruction	S)	
Project Mana	ger			υ	nited States Treasury		
4. Date	5. Full name of contributor	Out-of-st	tate PAC _		7. Amount of contribution	In-kind contribution description (if applicable)	
09/22/2014	Marcelyn F Vener				\$25.00	description (ii applicable)	
	6. Contributor address:	City	State	ZIP Code	\$25.00		
	7904 Mesa Trails Cir Austin, TX 78	731-1450					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)	•,	10 Emple	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-s	tate PAC	-	7. Amount of	8. In-kind contribution	
09/23/2014	Crystal Viagran	<del></del>			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$25.00		
	603 Allen St Austin, TX 78702-491	9					
	·				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)		10 Empl	oyer (See Instruction	s) .	
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Ashland Viscosi				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$25.00		
	4520 Bennett Ave Apt 105 Austin,	TX 78751-	4131				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	s)		10 Empl	oyer (See Instruction	s)	

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## SCHEDULE A

The I	nstruction Guide explains how to	Total pages Schedule A:     209				
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-st	ate PAC		7. Amount of	8. In-kind contribution
09/23/2014	Danna Volk				contribution	description (if applicable)
/	6. Contributor address:	City	State	ZIP Code	\$350.00	
	49 Sundown Pkwy Austin, TX 787	46-5257				
					(if travel outside o	Texas, complete Schedule T)
<ol><li>Principal occup</li></ol>	pation / Job title (See Instruction	s)		10 Emplo	oyer (See Instruction	s)
Retired				N	one	
4. Date	5. Full name of contributor	out-of-st	ate PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)
09/23/2014	William Volk				\$350.00	description (ii applicable)
	6. Contributor address:	City	State	ZIP Code	3330.00	
	49 Sundown Pkwy Austin, TX 787	46-5257				
					(if travel outside o	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)     10 Emplo				oyer (See Instruction	s) .	
Attorney				V	inson & Elkins, L.L.P.	
4. Date	5. Full name of contributor	out-of-st	tate PAC		7. Amount of contribution	In-kind contribution description (if applicable)
09/13/2014	Anne Walker				\$50.00	idescription (if applicable)
	6. Contributor address:	City	State	ZIP Code	330.00	
	9618 Indigo Brush Dr Austin, TX	78726-2451				
	· ·			,	, (if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Emple	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-si	tate PAC		7. Amount of	8. In-kind contribution
09/13/2014	Mark S Walker				contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$50.00	, i
	9618 Indigo Brush Dr Austin, TX	78726-245 I			·	
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Emple	oyer (See Instruction	s)

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## SCHEDULE A

The	Instruction Guide explains how to complete this form	Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler		3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributorout-of-state PAC		7. Amount of contribution	In-kind contribution description (if applicable)	
07/26/2014	Sue Wall 6. Contributor address: City State	ZIP Code	\$350.00		
	4703 Scottish Woods Cv Austin, TX 78746-7341		(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)	10 Emple	oyer (See Instruction	L	
Attorney	,	1	omack McClish Wall	•	
4. Date	Full name of contributorout-of-state PAC		7. Amount of contribution	In-kind contribution description (if applicable)	
07/26/2014	William M Wall 6. Contributor address: City State	ZIP Code	\$350.00		
	4703 Scottish Woods Cv Austin, TX 78746-7341				
·			(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions)	10 Empl	oyer (See Instruction	s)	
Teacher		A	ustin Independent School District		
4. Date	Full name of contributorout-of-state PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)	
09/25/2014	Lisa Walla 6. Contributor address: City State	ZIP Code	\$350.00		
	6101 Laguna Cliff Ln Austin, TX 78734-1177				
			(if travel outside o	Texas, complete Schedule T)	
Principal occu     Homemaker	pation / Job title (See Instructions)	·	oyer (See Instruction	s)	
4. Date	5. Full name of contributor		7. Amount of	8. In-kind contribution	
09/25/2014	Steven Walla		contribution	description (if applicable)	
	6. Contributor address: City State	ZIP Code	\$350.00		
	6101 Laguna Cliff Ln Austin, TX 78734-1177				
				Texas, complete Schedule T)	
Principal occu     Sales	pation / Job title (See Instructions)	,	oyer (See Instruction	os)	

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### **SCHEDULE A**

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The I	nstruction Guide explains how to	complete this	s form.		• =	Total pages Schedule A:     209	
2. FILER NAME	Stephen Adler	_		-	3. ACCOUNT # (Eti	nics Commission Filers)	
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution	
07/11/2014	H. Dalton Wallace				contribution	description (if applicable)	
	Contributor address:	City S	tate Z	IP Code	\$350.00		
	9505 Johnny Morris Rd Austin, TX	78724-1527					
					(if travel outside of	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	<del></del> )		10 Emplo	yer (See Instructions	5)	
Records Man	agement Consultant			Sa	nfesite		
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution	
07/11/2014	Kay Wallace			•	contribution	description (if applicable)	
	Contributor address:	City S	tate Z	IP Code	\$350.00		
		•	iaie 2	ir Code			
	9505 Johnny Morris Rd Austin, TX	78724-1527					
	` -				•	Texas, complete Schedule T)	
	pation / Job title (See Instructions	)		1	oyer (See Instructions	5)	
Homemaker	<u> </u>			N-	one		
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution	
09/19/2014	Colin Wallis				contribution	description (if applicable)	
	6. Contributor address:	City S	tate Z	IP Code	\$350.00		
	  1305 Bickler Rd Ste 116 Austin, TX	78704-2503					
					(if travel outside of	Texas, complete Schedule T)	
9 Principal occur	Loation / Job title (See Instructions	1		10 Emplo	oyer (See Instruction	<u> </u>	
Executive Di		,			ustin Parks Foundation	•	
4. Date	5. Full name of contributor	Out-of-state	DAC		7. Amount of	8. In-kind contribution	
		Out-of-state	PAC		contribution	description (if applicable)	
09/22/2014	Bill Walters, III	<b></b> -	–		\$350.00		
	6. Contributor address:	City S	tate Z	IP Code			
	1010 W Martin Luther King Jr Blvd	Austin, TX 7	8701-1070	)	,		
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)		10 Emplo	oyer (See Instruction	s)	
Investments		Walters Southwest					

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

www.ethics.state.tx.us Revised 04/19/2013

## SCHEDULE A

<del></del>						<del></del>	
The	Instruction Guide explains how to	complete th	is form.		Total pages Schedule A:		
	<u> </u>	<u> </u>			209 3. ACCOUNT # (Ethics Commission Filers)		
2. FILER NAME	Stephen Adler				3. ACCOUNT#(Et	nics Commission Filers)	
4. Date	Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Amy Wanamaker				contribution \$100.00	description (if applicable)	
	6. Contributor address:	City S	State	ZIP Code	\$100.00		
·	3305 Windsor Rd # B Austin, TX 78	8703-2245					
	٠.				(if travel outside o	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)     10 En					oloyer (See Instructions)		
4. Date	5. Full name of contributor	out-of-state	PAC _		7. Amount of	8. In-kind contribution	
08/21/2014	Martha Koock Ward				contribution	description (if applicable)	
	6. Contributor address:	City S	State	ZIP Code	\$25.00		
	905 E 55th 1/2 St Austin, TX 78751					, ,	
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	;)		10 Emplo	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state	PAC		7. Amount of	8. In-kind contribution	
08/28/2014	Martha Koock Ward	_			contribution	description (if applicable)	
	6. Contributor address:	City 5	State	ZIP Code	\$100.00		
	905 E 55th 1/2 St Austin, TX 7875 l	l	•				
					(if travel outside o	Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instructions	s)		10 Emplo	oyer (See Instruction	s)	
4. Date	Full name of contributor	out-of-state	PAC	`.	7. Amount of	8. In-kind contribution	
07/23/2014	Kevin Warden				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$200.00		
	2105 Goodrich Ave Apt 2 Austin, T	17		<i>''</i>			
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	3)		10 Empl	oyer (See Instruction	s)	
Owner			Austin Wich Ventures, LP				

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## **SCHEDULE A**

The	nstruction Guide explains how to	Total pages Schedule A:     209					
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-stat	te PAC		7. Amount of	8. In-kind contribution	
08/06/2014	lvy Warner	_	_		contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$100.00		
	4701 Summerset Trl Austin, TX 787	49-1667					
					(if travel outside of	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)		10 Emplo	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-stat	te PAC	·	7. Amount of	8. In-kind contribution	
07/29/2014	Amy Warr	_	,		contribution	description (if applicable)	
	6. Contributor address:	City	State	√ZIP Code	\$100.00		
	619 Bissonet Ln Austin, TX 78752-	·		0000			
	1019 Dissonet Lii Austiit, 1A 78752-	1541				1.4.0-6.3.1.7	
O. Dringing and	nation / Joh title (See Instructions)			40 Empl		Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	) 		IV Emplo	oyer (See Instruction		
4. Date	5. Full name of contributor	out-of-sta	te PAC		7. Amount of	8. In-kind contribution	
09/22/2014	Alisa Weldon	<del>_</del>			contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$150.00	T.	
	1211 W Mary St # 2 Austin, TX 787	-					
	1211 W Mary St # 2 Austid, 17. 767	04-2515				Tavan assessates Cabadula T)	
9 Principal occu	 pation / Job title (See Instructions	`		10 Emple	oyer (See Instruction	Texas, complete Schedule T)	
a. Timopai occu	pation 7 200 title (Oee mailbellons			TO Empire	byer (oce mandenom		
4. Date	5. Full name of contributor	out-of-sta	te PAC _		7. Amount of	8. In-kind contribution	
08/26/2014	Holly Werth				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	4112 Bluffridge Dr Austin, TX 7875	59-7354			:		
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)		10 Empl	oyer (See Instruction	s)	
Homemaker							

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## SCHEDULE A

	<del>-</del>			-		11.	
The	Instruction Guide explains how to	Total pages Schedule A:					
2. FILER NAME					209 3. ACCOUNT # (Ethics Commission Filers)		
Z. FILER NAIVIE	Stephen Adler				3. ACCOUNT # (Et	nics Commission Filers)	
4. Date	5. Full name of contributor	Out-of-st	rato BAC		7. Amount of	8. In-kind contribution	
	·		ale PAC _		contribution	description (if applicable)	
08/26/2014	Howard Werth				\$350.00		
	6. Contributor address:	City	State	ZIP Code			
	4112 Bluffridge Dr Austin, TX 7875	59-7354					
			-		(if travel outside of	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)		10 Emple	oyer (See Instructions	s)	
Division Pres	sident			A	shton Woods Homes		
4. Date	5. Full name of contributor	Dut-of-st	ate PAC	. "	7. Amount of	8. In-kind contribution	
07/03/2014	Barbara Wheat		_		contribution	description (if applicable)	
07703/2014		•	<b>.</b>		\$250.00		
	6. Contributor address:	City	State	ZIP Code			
	3904 Toro Canyon Rd Austin, TX 7	8746-1566					
					(if travel outside of	Texas, complete Schedule T)	
<ol><li>Principal occu</li></ol>	pation / Job title (See Instructions	)		10 Empl	oyer (See Instruction:	s)	
Community 1	Volunteer		<del> <u> </u></del>	N	one		
4. Date	5. Full name of contributor	out-of-st	tate PAC		7. Amount of	8. In-kind contribution	
07/03/2014	Daniel P Wheat IV	<del>.</del>	_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$250.00	,	
		•		211 0000			
	3904 Toro Canyon Rd Austin, TX 7	8/46-1566				,	
					1	Texas, complete Schedule T)	
	pation / Job title (See Instructions	s)		1	oyer (See Instruction	•	
Vice Preside	nt			В	arshop & Oles Compar	ny <u> </u>	
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution	
08/12/2014	Eugenia B Whitaker				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$50.00		
	4100 Jackson Ave Apt 317 Austin,	TX 78731-	6070				
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions			10 Empl	over (See Instruction	s)	
	F	,		· · · · - ·			

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## **SCHEDULE A**

The I	nstruction Guide explains how to		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
08/29/2014	Eugenia B Whitaker			contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$7.00	,
	4100 Jackson Ave Apt 317 Austin, T	X 78731-6070			
				(if travel outside of	Texas, complete Schedule T)
9. Principal occur	pation / Job title (See Instructions	)	10 Emple	oyer (See Instruction:	s)
4. Date	- 5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Benjamin White	_		contribution	description (if applicable)
	6. Contributor address:	City State	ZIP Code	\$100.00	
	4702 Rue St Austin, TX 78731-5622	!			
	·			(if travel outside o	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	)	10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
09/16/2014	Louisa White			contribution	description (if applicable)
i	Contributor address:	City State	ZIP Code	\$250.00	
	3112 Windsor Rd # A305 Austin, T.	X 78703-2350			
				(if travel outside o	Texas, complete Schedule T)
9. Principal occu Writer	pation / Job title (See Instructions	)	1	oyer (See Instruction elf	s)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution
07/09/2014	Gail Whitfield			contribution	description (if applicable)
	Contributor address:	City State	ZIP Code	\$350.00	
	1520 Ben Crenshaw Way Apt 221 A	ustin, TX 78746-6	169		
				(if travel outside o	Texas, complete Schedule T)
· ·	pation / Job title (See Instructions	)	1	oyer (See Instruction	
Owner		T	The Whitfield Company		

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## SCHEDULE A

The I	nstruction Guide explains how to		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/25/2014	Marcus Whitfield	<u> </u>	_		contribution	description (if applicable)
	6. Contributor address:	City	State	ZIP Code	\$350.00	·
	901 S Mo Pac Expy Ste 1-160 Aust	tin, TX 787	46-5853			
					(if travel outside of	Texas, complete Schedule T)
9. Principal occup	pation / Job title (See Instructions	s)		10 Emplo	oyer (See Instruction:	s)
Real Estate				Т	he Whitfield Company	
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution
09/20/2014	Courtney Whitworth		-		contribution	description (if applicable)
03.20.201	6. Contributor address:	City	Ctata	ZIP Code	\$175.00	
		City	State	ZIP Code	`	
	3907 Edgerock Dr Austin, TX 7873	31-1426				
					(if travel outside of	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s) 		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of	8. In-kind contribution
09/20/2014	David Whitworth				contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$175.00	
	3907 Edgerock Dr Austin, TX 787	31-1426				
,			•		(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)
4. Date	5. Full name of contributor	Out-of-	state PAC		7. Amount of	8. In-kind contribution
09/15/2014	Jennifer Whorton	_	_		contribution	description (if applicable)
	Contributor address:	City	State	ZIP Code	\$350.00	
	l 1200 Jollyville Rd Austin, TX 78	759-4813		•		
					(if travel outside o	Texas, complete Schedule T)
9. Principal occu	pation / Job title (See Instruction	s)	-	10 Empl	oyer (See Instruction	s)
Homemaker				N	lone	

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## SCHEDULE A

The	Instruction Guide explains how to	o complete	this form			_	Total pages Schedule A:	
2. FILER NAME	Stephen Adler	<u> </u>				3. ACCOUNT # (Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC	•	<u>.</u>	7. Amount of contribution	8. In-kind contribution description (if applicable)	
09/15/2014	Michael Whorton  6. Contributor address:	City	State	ZI	P Code	\$350.00	деясприон (п аррисавіе)	
	11200 Jollyville Rd Austin, TX 78	759-4813				(if travel outside o	Texas, complete Schedule T)	
					oyer (See Instructions horton Insurance Serv			
4. Date 09/25/2014	5. Full name of contributor  Jim A Wick  6. Contributor address:	City	state PAC _	ZII	Code	7. Amount of contribution \$50.00	In-kind contribution description (if applicable)	
2611 Ektom Dr Apt D Austin, TX 78745-2629  9. Principal occupation / Job title (See Instructions)  10 En						(if travel outside o	Texas, complete Schedule T)	
4. Date	5. Full name of contributor	Doutofe	state PAC	'		7. Amount of	8. In-kind contribution	
09/22/2014	Lynne Wiggins  6. Contributor address:	City	State	ZII	P Code	contribution \$350.00	description (if applicable)	
	3310 Bridle Path Austin, TX 7870.	3-2712				(if travel outside o	Texas, complete Schedule T)	
Principal occu     Attorney	pation / Job title (See Instruction	s)			•	oyer (See Instruction ecan Street Partners	s)	
4. Date 09/25/2014	5. Full name of contributor  Kathleen H. Wight		state PAC			7. Amount of contribution \$20.00	In-kind contribution description (if applicable)	
	Contributor address:     6202 Shadow Mountain Cv Austin	City 1, TX 78731	State -4110	ZI	P Code	(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	Principal occupation / Job title (See Instructions)					oyer (See Instruction		

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### SCHEDULE A

The	naturation Orido avalaina harrit		thin forms		1. Total pages Scho	Total pages Schedule A:	
	nstruction Guide explains how to	o complete	this form			209	
2. FILER NAME	Stephen Adler				3. ACCOUNT#(Et	hics Commission Filers)	
4. Date	5. Full name of contributor	oul-of-s	late PAC _		7. Amount of	8. In-kind contribution	
09/25/2014	Sharon Wilkes			•	contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$350.00		
	2901 Bowman Ave Austin, TX 783	703-2249					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)	
Owner				S	wiftex, Inc.		
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of	8. In-kind contribution	
09/24/2014	Walter Wilkie		•		contribution \$350.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$330.00		
	98 San Jacinto Blvd Ste 1306 Aust	in, TX 7870	01-4082				
					(if travel outside o	Texas, complete Schedule T)	
Principal occup     Gadget Make	pation / Job title (See Instruction	s)		·	ployer (See Instructions) Self		
4. Date	5. Full name of contributor	Out-of-s	state PAC	·	7. Amount of	8. In-kind contribution	
08/04/2014	Pamela P. Willeford		_		contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
	  1801 Raleigh Ave Austin, TX 7870	03-2621				·	
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		, 10 Emp	loyer (See Instruction	s) .	
4. Date	5. Full name of contributor	Out-of-s	state PAC		7. Amount of	8. In-kind contribution	
09/19/2014	Beverly Williams				contribution	description (if applicable)	
•	6. Contributor address:	City	State	ZIP Code	\$350.00		
	3208 Lating Stream Ln Austin, TX	78746-200	)3				
					(if travel outside o	Texas, complete Schedule T)	
,	pation / Job title (See Instruction	s)		I -	loyer (See Instruction	s)	
Realtor				[ F	Realty Austin		

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## SCHEDULE A

The I	nstruction Guide explains how to	Total pages Schedule A:     209						
2. FILER NAME	Stephen Adler					3. ACCOUNT # (Eti	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	tate PAC			7. Amount of	8. In-kind contribution	
09/25/2014	Carter Williams						description (if applicable)	
	6. Contributor address:	City	State	ZIP C	ode	\$50.00		
	8209 Dark Ridge Cv Austin, TX 78	737-3511						
						(if travel outside of	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)		10	Emplo	oyer (See Instructions)		
4. Date	5. Full name of contributor	out-of-s	state PAC			7. Amount of	8. In-kind contribution	
09/16/2014	Donnie Williams					contribution	description (if applicable)	
•	Contributor address:	City	State	ZIP C	Code	\$350.00		
	4008 Knollwood Dr Austin, TX 787			:				
	Texas, complete Schedule T)							
Principal occupation / Job title (See Instructions)					Emplo	oyer (See Instruction:	s)	
Executive	<del></del>				Sc	overeign Bank		
4. Date	5. Full name of contributor	out-of-s	state PAC			7. Amount of	8. In-kind contribution	
09/20/2014	Gayland Williams					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP C	Code	\$50.00		
	8305 Asmara Dr Austin, TX 78750-	-7809						
						(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	;)		10	Emplo	oyer (See Instruction	S)	
4. Date	5. Full name of contributor	out-of-s	state PAC _			7. Amount of	8. In-kind contribution	
08/12/2014	Lemuel C Williams					contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP C	Code	\$250.00	·	
	Arboretum Plaza II 9442 Capital of TX 78759-7239	Texas Hw	y N., Suite	400 Au	ustin,			
0. D.:	- Francisco ( John Killer ( Constant)	<u>,</u>	-	140		<del></del>	Texas, complete Schedule T)	
	pation / Job title (See Instructions clopment Director	5)		10	•	oyer (See Instruction emalto	S)	
Channel Dev	ciopinent Director			1	U	emano		

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### SCHEDULE A

The I	nstruction Guide explains how to	complete th	nis form.		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				ACCOUNT # (Ethics Commission Filers)		
4. Date	5. Full name of contributor	out-of-stat	e PAC			8. In-kind contribution	
0 <b>7/10/20</b> 14	Linda Williams			, and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second		description (if applicable)	
٠	6. Contributor address:	City	State	ZIP Code	\$350.00		
	2801 Scenic Dr Austin, TX 78703-1						
					(if travel outside of	Texas, complete Schedule T)	
<ol><li>Principal occuj</li></ol>	pation / Job title (See Instructions	) .		10 Emplo	yer (See Instructions	5)	
Retired				N-	one		
4. Date	5. Full name of contributor	out-of-stat	e PAC			8. In-kind contribution	
09/25/2014	Randy Williams				contribution	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$100.00		
;	9005 Meacham Way Austin, TX 78	749-4287					
	•				(if travel outside o	Texas, complete Schedule T)	
9. Principal occup	pation / Job title (See Instructions	)		10 Emplo	oyer (See Instruction	5)	
4. Date	5. Full name of contributor	out-of-stat	te PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Talley Williams				contribution	description (if applicable)	
	Contributor address:	City	State	ZIP Code	\$50.00		
	  8209 Dark Ridge Cv Austin, TX 78'	737-3511					
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)		10 Emplo	oyer (See Instruction	<u> </u>	
4. Date	Full name of contributor	out-of-sta	te PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)	
07/10/2014	Don Williamson				\$25.00	description (ii applicable)	
	Contributor address:	City	State	ZIP Code	\$23.00		
	1606 Lightsey Rd Austin, TX 78704-6021						
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)		10 Emplo	oyer (See Instruction	s)	

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## SCHEDULE A

The	Instruction Guide explains how to		Total pages Schedule A:     209					
2. FILER NAME	Stephen Adler					hics Commission Filers)		
<ul><li>4. Date</li><li>07/19/2014</li><li>9. Principal occur</li></ul>	5. Full name of contributor Patti J. Willingham 6. Contributor address: 500 E Riverside Dr Apt 125 Austin pation / Job title (See Instructions		State	ZIP Code	7. Amount of contribution \$25.00  (if travel outside oployer (See Instruction	8. In-kind contribution description (if applicable)  Texas, complete Schedule T)		
4. Date 08/27/2014	<ul><li>5. Full name of contributor</li><li>George Wilson</li><li>6. Contributor address:</li><li>1514 Mohle Dr Austin, TX 78703-</li></ul>	out-of-sta	ate PAC _	ZIP Code	7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)		
9. Principal occupation / Job title (See Instructions) Principal				10 Em	(if travel outside of Texas, complete Schedule T)  10 Employer (See Instructions) Frac Consulting LLC			
4. Date 09/15/2014	<ul><li>5. Full name of contributor</li><li>Darrell Windham</li><li>6. Contributor address</li><li>2606 Maria Anna Rd Austin, TX 78</li></ul>	Out-of-sta	ate PAC _	ZIP Code	7. Amount of contribution \$350.00	8. In-kind contribution description (if applicable)		
9. Principal occu Attorney	pation / Job title (See Instructions	s)		10 Em	oloyer (See Instruction Greenberg Traurig, LLF	· ·		
4. Date 09/15/2014	5. Full name of contributor Teresa Windham 6. Contributor address: 2606 Maria Anna Rd Austin, TX 78	City 8703-1627	ate PAC _	ZIP Code		8. In-kind contribution description (if applicable)  - Texas, complete Schedule T)		
Principal occu     Owner	pation / Job title (See Instructions	s)		10 Em	10 Employer (See Instructions)  Valentine's Too			

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# **SCHEDULE A**

The I	Instruction Guide explains how to	complete this fo	erm.		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	5. Full name of contributor	out-of-state PAC	;		8. In-kind contribution		
09/10/2014	Seth Winick			contribution	description (if applicable)		
	6. Contributor address:	City State	e ZIP Code	\$200.00			
	10607 Londonshire Ln Austin, TX	78739-1645					
				(if travel outside o	Texas, complete Schedule T)		
9. Principal occur	pation / Job title (See Instruction	loyer (See Instruction	s)				
Partner				Haley Mathews Winick	& Kroll LLC		
4. Date	5. Full name of contributor	out-of-state PAC	;	7. Amount of	8. In-kind contribution		
07/01/2014	Jacob Winkelman			contribution	description (if applicable)		
	6. Contributor address:	City State	e ZIP Code	\$100.00			
	304 Hillcrest Ct West Lake Hills, T	X 78746-5491					
٥				(if travel outside o	Texas, complete Schedule T)		
9. Principal occup	pation / Job title (See Instruction	s)	10 Emp	ployer (See Instruction	s)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution		
09/10/2014	Ann Wise		-	contribution	description (if applicable)		
	6. Contributor address:	City State	e ZIP Code	\$50.00			
	3600 Pinnacle Rd Austin, TX 7874	16-7417					
				(if travel outside o	Texas, complete Schedule T)		
9. Principal occup	pation / Job title (See Instruction	s)	10 Emp	bloyer (See Instruction	S)		
4. Date	5. Full name of contributor	out-of-state PAC	<del>.</del>	7. Amount of	8. In-kind contribution		
09/15/2014	Sally Wittliff	•		contribution	description (if applicable)		
	6. Contributor address:	City State	e ZIP Code	\$350.00			
	1301 Kent Ln Austin, TX 78703-3	816	•				
				(if travel outside o	Texas, complete Schedule T)		
· '	pation / Job title (See Instruction	s)	1	ployer (See Instruction	is)		
Attorney			,	3611			

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# SCHEDULE A

	· · · · · · · · · · · · · · · · · · ·							
The I	nstruction Guide explains how to	o complete	this form.		Total pages Schedule A:     209			
2. FILER NAME	Stephen Adler				3. ACCOUNT#(Et	hics Commission Filers)		
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of	8. In-kind contribution		
09/ <b>10/2</b> 014	Eva Womack				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$350.00			
	4305 Waterford Pl Austin, TX 787	31-4635						
	, i				(if travel outside o	Texas, complete Schedule <b>T</b> )		
9. Principal occup	pation / Job title (See Instruction	s)	10 Emp	loyer (See Instruction	s)			
Retired				1	Vone			
4. Date	5. Full name of contributor	rout-of-state PAC			7. Amount of	8. In-kind contribution		
09/10/2014	2014 Marvin Womack				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$350.00	٠.		
	4305 Waterford Pl Austin, TX 787	31-4635						
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occup	pation / Job title (See Instruction	s)		10 Emp	loyer (See Instruction	s)		
Mechanic				I	Letterkenny Army Depo	ot .		
4. Date	5. Full name of contributor	out-of-state PAC			7. Amount of	8. In-kind contribution		
09/25/2014	Marge Wood				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$25.00			
	2303 Comburg Castle Way Austin	,TX 78748-	-5215					
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	s)		10 Emp	loyer (See Instruction	s)		
4. Date	5. Full name of contributor	out-of-s	state PAC _	•	7. Amount of	8. In-kind contribution		
09/15/2014	Harmon Wooldridge				contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$350.00			
	2208 Far Gallant Dr Austin, TX 78	3746-1809						
	,				(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	ıs)		10 Emp	loyer (See Instruction	s)		
None					None			

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## **SCHEDULE A**

	<del></del>						
. The	Instruction Guide explains how t	o complete this form	٦.	Total pages Schedule A:			
2. FILER NAME	Stephen Adler			3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution		
09/24/2014	Juli Word	<del>_</del> .		contribution	description (if applicable)		
	6. Contributor address:	City State	ZIP Code	\$175.00			
	15101 Glen Echo Dr Austin, TX 7	8717-3974					
				(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	ns)	10 Empl	oyer (See Instruction	s)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution		
09/24/2014	Justin Word			contribution	description (if applicable)		
	6. Contributor address:	City State	ZIP Code	\$175.00			
	15101 Glen Echo Dr Austin, TX 7	8717-3974					
				(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	ns)	10 Empl	oyer (See Instruction	s)		
4. Date	5. Full name of contributor	out-of-state PAC	•	7. Amount of	8. In-kind contribution		
09/23/2014	Cindy Work Abell			contribution	description (if applicable)		
	6. Contributor address:	City State	ZIP Code	\$250.00	1		
	2614 Ravello Ridge Dr Austin, TX	C 78735-1712					
	·			(if travel outside o	Texas, complete Schedule T)		
Principal occu     Consultant	pation / Job title (See Instruction	ns)	1	oyer (See Instruction elf	S)		
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution		
09/09/2014	Ryder Wrenn			contribution	description (if applicable)		
	6. Contributor address:	City State	ZIP Code	\$350.00			
	12217 Barrel Bnd Austin, TX 787	48-2017					
				(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	ns)	- I	10 Employer (See Instructions)			
Owner			Wrennfro Fitntess				

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## **SCHEDULE A**

The	Instruction Guide explains how to	complete this form		Total pages Schedule A:		
2. FILER NAME	<u> </u>		<u></u>	3. ACCOUNT # (Ethics Commission Filers)		
	Stephen Adler			,	,	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/24/2014	Janet Wright			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$100.00		
	1314 Shannon Oaks Trl Austin, TX	78746-7343				
				(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)	10 Employer (See Instructions)			
4. Date	5. Full name of contributor			7. Amount of	8. In-kind contribution	
08/26/2014	Anne S. Wynne	out-of-state PAC _		contribution	description (if applicable)	
06/20/2014	•	City Plate	710 Cada	\$350.00		
	6. Contributor address:	City State	ZIP Code			
	1036 Liberty Park Dr house 49 Aust	tin, TX 78746-6986				
				1 '	Texas, complete Schedule T)	
,	pation / Job title (See Instructions	)	· ·	oyer (See Instruction	s)	
Attorney			11	card Wynne LLP	v.	
4. Date	Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/07/2014	Daniel Yahiel			contribution	description (if applicable)	
	6. Contributor address:	City State	ZIP Code	\$50.00	,	
	3908 Glengarry Dr Austin, TX 7873	31-3812				
		•		(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	)	10 Empl	oyer (See Instruction	s)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of	8. In-kind contribution	
09/25/2014	Scott Yarborough			contribution	description (if applicable)	
0512372011	6. Contributor address:	City State	ZIP Code	\$350.00		
		•	ZIF Gode			
	360 Nueces St Apt 4111 Austin, TX	. 76701-4293				
2.2			10 = :		Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instructions	5)	,	oyer (See Instruction	S)	
i Business De	venommeni		. Δ	Zunasana inc		

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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# SCHEDULE A

The	Instruction Guide explains how t	o complete this fo	rm.		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				thics Commission Filers)		
4. Date	5. Full name of contributor	out-of-state PAC	:	7. Amount of	8. In-kind contribution		
09/15/2014	Lynn Yeldell	<del>-</del>		contribution	description (if applicable)		
	6. Contributor address:	City State	ZIP Co	\$350.00 de			
	1211 W Mary St # 2 Austin, TX 78	3704-2915	,				
				(if travel outside o	Texas, complete Schedule T)		
· -	pation / Job title (See Instruction	10 E	10 Employer (See Instructions)				
Owner			· .	L Style G Style			
4. Date	5. Full name of contributor	out-of-state PAC	7. Amount of contribution	In-kind contribution description (if applicable)			
09/25/2014	Carolyn Yokubaitis	•		\$350.00			
	6. Contributor address:	City State	ZIP Co		,		
	1044 Liberty Park Dr Austin, TX 7	78746-6943					
				(if travel outside o	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)				Employer (See Instruction	ns)		
Owner				Powerhouse Manageme	nt		
4. Date	5. Full name of contributor	out-of-state PAC	;	7. Amount of	8. In-kind contribution		
09/25/2014	Ron Yokubaitis			contribution	description (if applicable)		
	6. Contributor address:	City State	e ZIP Co	\$350.00			
	1044 Liberty Park Dr Austin, TX	78746-6943					
				(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	is)	10 E	Employer (See Instruction	ns)		
Owner				Powerhouse Manageme	ent		
4. Date	5. Full name of contributor	out-of-state PAC	;	7. Amount of	8. In-kind contribution		
08/29/2014	Henry Yoshida			contribution	description (if applicable)		
	6. Contributor address:	City State	∋ ZIP Co	\$350.00			
	300 S Lamar Blvd Apt 513 Austin	, TX 78704-1159					
			(if travel outside o	Texas, complete Schedule T)			
9. Principal occu	pation / Job title (See Instruction	10 E	10 Employer (See Instructions)				
Consultant				MY Group, LLC.			

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# SCHEDULE A

The	Instruction Guide explains how to	complete	this form		Total pages Schedule A:     209		
2. FILER NAME	Stephen Adler				3. ACCOUNT#(Et	hics Commission Filers)	
4. Date	5. Full name of contributor	out-of-s	state PAC _		- · · · · · · · · · · · · · · · · · · · · · · · · · · · · · · · · · · · · ·	8. In-kind contribution	
07/17/2014	J Dudley Youman				contribution	description (if applicable)	
ż	6. Contributor address:	City	State	ZIP Code	\$100.00		
	4007 Edgemont Dr Austin, TX 787	31-5713					
					(if travel outside of	Texas, complete Schedule T)	
,					oyer (See Instructions	s)	
Physician				T	exas Oncology		
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution	8. In-kind contribution description (if applicable)	
08/21/2014					\$100,00	,	
	6. Contributor address:	City	State	ZIP Code			
	4007 Edgemont Dr Austin, TX 787	31-5713					
					(if travel outside of	Texas, complete Schedule T)	
9. Principal occupation / Job title (See Instructions) 10					oyer (See Instruction	s)	
Physician				T	exas Oncology		
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of contribution	8. In-kind contribution	
09/22/2014	Margaret Youngblood				\$200.00	description (if applicable)	
	6. Contributor address:	City	State	ZIP Code	\$200.00		
	2701 Regents Park Austin, TX 787	46-6843			•		
					(if travel outside o	Texas, complete Schedule T)	
	pation / Job title (See Instruction	s)			oyer (See Instruction		
Certified Pub	olic Accountant			N	laxwell Locke & Ritter	•	
4. Date	5. Full name of contributor	out-of-s	state PAC _		7. Amount of contribution	8. In-kind contribution description (if applicable)	
09/19/2014	Gary E Zausmer				\$250.00	,	
	Contributor address:	City	State	ZIP Code			
	7605 Stoneywood Dr Austin, TX 78731-1440						
					(if travel outside o	Texas, complete Schedule T)	
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	ployer (See Instructions)		
Attorney				l V	Winstead PC		

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## SCHEDULE A

The	Instruction Guide explains how to		Total pages Schedule A:     209					
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	5. Full name of contributor	out-of-s	tate PAC		7. Amount of	8. In-kind contribution		
09/16/2014	Charles Zeller				contribution	description (if applicable)		
	Contributor address:	City	State	ZIP Code	\$350.00			
	811 N Tumbleweed Trl Austin, TX	78733-324						
					(if travel outside o	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)     Retired					10 Employer (See Instructions) None			
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution		
09/16/2014	5/2014 Sylvia Zeller				contribution	description (if applicable)		
,	6. Contributor address:	City	State	ZIP Code	\$350.00			
	811 N Tumbleweed Trl Austin, TX		13					
		. 10103 32	.5		(if travel outside o	Texas, complete Schedule T)		
9. Principal occupation / Job title (See Instructions)					oyer (See Instruction	<u> </u>		
Retired	•			1	one	,		
4. Date	5. Full name of contributor	out-of-s	state PAC	1	7. Amount of	8. In-kind contribution		
09/04/2014	Adam Zimel	_			contribution	description (if applicable)		
	6. Contributor address:	City	State	ZIP Code	\$100.00			
	  4009 Madrid Cv Austin, TX 78759	9-5058						
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction			
4. Date	5. Full name of contributor	Out-of-s	state PAC _		7. Amount of	8. In-kind contribution		
08/23/2014	Suzanne Berkel				contribution	description (if applicable) Food for event		
	6. Contributor address:	City	State	ZIP Code	\$225.00			
	4405 Sinclair Ave Austin, TX 787	56-3220	•					
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	s)		10 Empl	oyer (See Instruction	s)		
Attorney					Self			

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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## SCHEDULE A

The	Instruction Guide explains how t	· -	Total pages Schedule A:     209					
2. FILER NAME	Stephen Adler				3. ACCOUNT # (Et	hics Commission Filers)		
4. Date	Full name of contributor	out-of-s	state PAC	•	7. Amount of	8. In-kind contribution		
09/22/2014	Betty Blackson	dress: City State			contribution	description (if applicable)		
	6. Contributor address:			ZIP Code	\$74.00	Chairs for event		
	9803 Mandeville Cir Austin, TX 78							
		(if travel outside o	Texas, complete Schedule T)					
9. Principal occup	pation / Job title (See Instruction	oloyer (See Instruction	s)					
Import Clearance					Dell			
4. Date	5. Full name of contributor	out-of-s	state PAC		7. Amount of	8. In-kind contribution		
09/22/2014	Steve Blackson				contribution	description (if applicable)		
	6. Contributor address:	City State		ZIP Code	\$74.00	Chairs for event		
	9803 Mandeville Cir Austin, TX 7	78750-2811						
		, , , , , , , , , , , , , , , , , , , ,				Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	s)		10 Em	10 Employer (See Instructions)			
	<del></del>							
4. Date	5. Full name of contributor	out-of-	state PAC		7 Amount of contribution	8. In-kind contribution description (if applicable)		
09/21/2014	Cameron Lockley				\$250.00	Food for event		
	6. Contributor address:	City	State	ZIP Code	\$2.50.00			
	2000 Zach Scott St Austin, TX 787							
					(if travel outside o	Texas, complete Schedule T)		
9. Principal occu	pation / Job title (See Instruction	s)		10 Em	mployer (See Instructions)			
Managing Pa	ntner				Mi Encanto Enterprises, LLC			

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Texas Ethics Co	mmission	P.O. Box 120	070 Austi	n, Texas	78711-2070	(51	12) 463-5800	(TDD 1-800-735-2989)
LOAN	S						÷	SCHEDULE E
The	Instruction Gui	ide explains ho	w to complete t	his form		1. Total pag	ges Schedule I	<b>E</b> :
2. FILER NAME	Stephen Adler					3. ACCOU	NT # (Ethics (	Commission Filers)
4.	-	TOTAL OF	UNITEMIZE	ED LOA	ANS:			\$0.00
5. Date of loan 09/18/2014	7. Name of Stephen I. Ad		out-of-sta	ite PAC _				9. Loan Amount \$102,000.00
6 Is lender a financial Institution?	8. Lender ad 3313 Lake Clif	ddress: f Ct Austin, TX	City 78746-4676	State	ZIP	Code		10. Interest rate 0.00% 11. Maturity date
12. Principal occ Attorney	upation / Job t	itle (See Instruc	ctions)	1	13 Employer B	(See Instruc arron & Adler	•	
14. Description o  ✓ none	of Collateral			1	15 Check if pe ✓	ersonal funds	s were deposi	ted into political account
16 GUARANTOR INFORMATION	17 Name of	guarantor						19 Amount Guaranteed
not applicable	18 Guaranto	or address:	City	State	ZIP	Code		
20 Principal Occ	upation (See I	nstructions)			21 Emplo	oyer (See Ins	structions)	

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### SCHEDULE F

		EXPENDITURE CATEGORIES FOR BOX 8(a)					
Accounting/Banking Legal Consulting Expense Food Event Expense Polli		Awards/Memorials Expense I Services Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Ex		Transportation Equi Contributions/Donat Candidate/Officehol		nyment/Reimbursement Ition Equipment & Related Expense Ins/Donations Made By (Officeholder/Political Committee Inter a category not listed above)	
		The Instruction	on Guide explains how t	o complet	te this form		
1.	. Total pages Schedule F: 89	FILER NAME     Stephen Adler		3	. ACCOUN	IT # (Ethics Commission Filers)	
4	Date	5 Payee name					
	07/28/2014	Office Max Austin				`	
6	Amount \$193.76	7 Payee address:	City:	Sta	ate:	Zip Code	
		907 W 5th St Austin, TX 7	78703-5426				
8	PURPOSE OF EXPENDITURE	(a) Category(See categories list Office Overhead/Rental Expense	sted at the top of this schedule)	Office	supplies	travel outside of Texas, complete Schedule T	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office s		X, officeholder living expense Office held	
4	Date	5 Payee name					
	08/06/2014	Office Max Austin					
6	Amount \$439.69	7 Payee address:	City:	Sta	ate:	Zip Code	
		907 W 5th St Austin, TX 7	78703-5426				
8	PURPOSE OF EXPENDITURE	(a) Category(See categories list Office Overhead/Rental Expense	sted at the top of this schedule)		escription (If	travel outside of Texas, complete Schedule T	
				Ст	eck if Austin, T	X, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ime	Office s	ought	Office held	
4	Date	5 Payee name					
	08/12/2014	Office Max Austin					
6	Amount \$56.28	7 Payee address:	City:	Sta	ate:	Zip Code	
		907 W 5th St Austin, TX	78703-5426				
8	PURPOSE OF	(a) Category(See categories li	sted at the top of this schedule)	(b) De	escription (If	travel outside of Texas, complete Schedule T	
	EXPENDITURE	Office Overhead/Rental Expense			supplies		
				I □ cr	eck if Austin T	TX afficeholder living expense	

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Office sought

Candidate/Officeholder name

Complete ONLY if direct expenditure to benefit C/OH

Office held

### SCHEDULE F

Advertising Expense	-
Accounting/Banking	
Consulting Expense	
Event Expense	
Fees	

Gift/Awards/Memorials Expense Legal Services

P.O. Box 12070

Food/Beverage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

(512) 463-5800

Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1. Total pages Schedule F: 2. FILER NAME 3. ACCOUNT # (Ethics Commission Filers) Stephen Adler 4 Date 5 Payee name 08/28/2014 Office Max Austin State: Zip Code 6 Amount 7 Payee address: City: \$193.76 907 W 5th St Austin, TX 78703-5426 (a) Category(See categories listed at the top of this schedule) (b) Description(If travel outside of Texas, complete Schedule T) **PURPOSE OF** Office Overhead/Rental Expense **EXPENDITURE** Office supplies Check if Austin, TX, officeholder living expense Complete ONLY if direct Office sought Office held Candidate/Officeholder name expenditure to benefit C/OH 4 Date 5 Pavee name 09/04/2014 Office Max Austin State: Zip Code 7 Payee address: City: 6 Amount \$1,419.06 907 W 5th St Austin, TX 78703-5426 (a) Category(See categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE OF** Office Overhead/Rental Expense **EXPENDITURE** Office Supplies Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 09/22/2014 Office Max Austin State: Zip Code City: 7 Payee address: 6 Amount \$136.37 907 W 5th St Austin, TX 78703-5426 (a) Category(See categories listed at the top of this schedule)
Office Overhead/Rental Expense (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE OF EXPENDITURE** Office Supplies Check if Austin, TX, officeholder living expense Complete ONLY if direct Office held Candidate/Officeholder name Office sought expenditure to benefit C/OH

## **SCHEDULE F**

	<del></del>						
EXPENDITURE CATEGORIES FOR BO					( 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense			Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense		Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee  Se OTHER (enter a category not listed above)		
1	. Total pages Schedule F:	2. FILER NAME	on Guide explains how to			# (Ethics Commission Filers)	
•	89	Stephen Adler		0. /	.0000111	" (Ethios commission there)	
4	Date	5 Payee name				<del></del>	
•	07/23/2014	Office Supply King					
6	Amount	7 Payee address:	City:	State	<del></del>	Zip Code	
•	\$80.15	302 Industrial Dr Columbi	·	• •			
8	PURPOSE OF EXPENDITURE	(a) Category(See categories list Office Overhead/Rental Expense	sted at the top of this schedule)	Office S	upplies	avel outside of Texas, complete Schedule T	
_					<del></del>	officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office sou	gnt	Office held	
4	Date	5 Payee name					
	07/10/2014	Oliveira Public Communic	ations				
6	Amount	7 Payee address:	City:	State	):	Zip Code	
	\$3,000.00	4315 Guadalupe St Ste 303	3 Austin, TX 78751-3795				
8	PURPOSE OF	(a) Category(See categories lis	sted at the top of this schedule)	(b) Desc	cription (If tra	avel outside of Texas, complete Schedule T	
	EXPENDITURE	Consulting Expense		Commu	nications cons	sulting services	
		·		Chec	k if Austin, TX,	, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ime	Office sou	ıght	Office held	
4	Date	5 Payee name					
	08/20/2014	Oliveira Public Communic					
6	Amount \$3,000.00	7 Payee address:	City:	State	<del>)</del> :	Zip Code	
		4315 Guadalupe St Ste 30	3 Austin, TX 78751-3795				
8	PURPOSE OF	(a) Category (See categories li	sted at the top of this schedule)	(b) Des	cription (If tre	avel outside of Texas, complete Schedule T	
	EXPENDITURE	Consulting Expense				sulting services	
				Chec	k if Austin, TX	, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ıme	Office sou	<b>ight</b>	Office held	

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

## POLITICAL EXPENDITURES

## SCHEDULE F

Advertising Expense	
Accounting/Banking	
Consulting Expense	
Event Expense	
Fees	

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Printing Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

(512) 463-5800

rees Filli	ung Expense Onice Overneau/Rental Ex	OTHER (enter a category not listed above)
	The Instruction Guide explains how to	complete this form.
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT # (Ethics Commission Filers)
89	Stephen Adler	
4 Date	5 Payee name	
. 09/10/2014	Oliveira Public Communications	·
6 Amount \$3,000.00	7 Payee address: City:	State: Zip Code
	4315 Guadalupe St Ste 303 Austin, TX 78751-3795	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Communications consulting services
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
07/01/2014	Opinion Analysts, Inc.	
6 Amount \$2,000.00	7 Payee address: City:	State: Zip Code
	906 Rio Grande St Austin, TX 78701-2222	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Data analytics consulting
	<u> </u>	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	1.001.1.0
07/19/2014	Opinion Analysts, Inc.	
6 Amount	7 Payee address: City:	State: Zip Code
\$2,000.00		
	906 Rio Grande St Austin, TX 78701-2222	
8 PURPOSE OF	(a) Category(See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
EXPENDITURE	Consulting Expense	Data analytics consulting
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

Opinion Analysts, Inc.

Candidate/Officeholder name

906 Rio Grande St Austin, TX 78701-2222

(a) Category (See categories listed at the top of this schedule)
Consulting Expense

7 Payee address:

### **POLITICAL EXPENDITURES**

#### SCHEDULE F

_		EXPENDITURE CATEGORIES FOR BOX 8(a)					
Accounting/Banking Legal Consulting Expense Food Event Expense Polli		t/Awards/Memorials Expense gal Services od/Beverage Expense Illing Expense nting Expense	Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense		Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)		
		The Instructi	on Guide explains how to	complete	this form.		
1.	Total pages Schedule F:	2. FILER NAME		3.	ACCOUNT #	(Ethics Commission Filer	<u>s)</u>
	89	Stephen Adler			,		
4	Date	5 Payee name			· <del></del>	. :	
	08/01/2014	Opinion Analysts, Inc.					
ŝ	Amount \$2,000.00	7 Payee address: 906 Rio Grande St Austin	City: , TX 78701-2222	State		Zip Code	
3	PURPOSE OF EXPENDITURE	(a) Category (See categories li Consulting Expense	sted at the top of this schedule)	Data an	alytics consulting	ol outside of Texas, complete Scher g ficeholder living expense	dule T
)	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office so	<del> </del>	Office held	
4	Date _	5 Payee name				· ·	
	08/12/2014	Opinion Analysts, Inc.					
3	Amount \$16,000.00	7 Payee address: 906 Rio Grande St Austin		Stat		Zip Code	
3	PURPOSE OF EXPENDITURE	(a) Category(See categories li Polling Expense	sted at the top of this schedule)	Survey	•	al outside of Texas, complete Scheo	dule 1
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office so	ught	Office held	
4	Date	5 Payee name				···	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED	

City:

State:

Office sought

Data analytics consulting

09/02/2014

\$2,000.00

PURPOSE OF EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

6 Amount

Office held

Zip Code

(b) Description (If travel outside of Texas, complete Schedule T)

Check if Austin, TX, officeholder living expense

Revised 07/28/2014

# POLITICAL EXPENDITURES

## SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Accounting/Banking L Consulting Expense F Event Expense F	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	ices Solicitation/Fundraising Exprage Expense Travel In District ense Travel Out Of District		xpense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee		
	<del>,</del>	ion Guide explains how to	complete this form.			
Total pages Schedule I			3. ACCOUNT	# (Ethics Commission Filers)		
89	Stephen Adler	<del></del>		· · · · · · · · · · · · · · · · · · ·		
4 Date	5 Payee name					
07/01/2014	Marco A Orrantia	0.1	01-1	7'- 0-1		
6 Amount \$1,584.00		City: 1029 Austin, TX 78752-000	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories Salaries/Wages/Contract Labor	listed at the top of this schedule)	Salary	ivel outside of Texas, complete Schedule T		
9 Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder n	ame	Office sought	Office held		
4 Date	5 Payee name		<del> </del>			
07/15/2014	Marco A Orrantia					
6 Amount \$1,584.00		City: 1029 Austin, TX 78752-000	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category(See calegories Salaries/Wages/Contract Labor	listed at the top of this schedule)	Salary	avel outside of Texas, complete Schedule T		
9 Complete ONLY if direct	Candidate/Officeholder n	ame	Office sought	officeholder living expense Office held		
expenditure to benefit C/C						
4 Date	5 Payee name	•				
07/31/2014	Marco A Orrantia	·				
6 Amount \$1,584.00		City: 1029 Austin, TX 78752-000	State:	Zip Code		
	7200 Lasy Willia Di Unit	1022 Austill, 1A 10132-000	i.i.			
8 PURPOSE OF EXPENDITURE	(a) Category(See categories Salaries/Wages/Contract Labor	listed at the top of this schedule)	Salary	avel outside of Texas, complete Schedule T		
9 Complete ONLY if direct	Candidate/Officeholder n	ame	Office sought	officeholder living expense Office held		
expanditure to benefit C/C		enii C	Cilion and Alik	CHICO HOIG		

P.O. Box 12070

## SCHEDULE F

EXPENDITURE CATEGORIES					FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees  Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense		Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense		Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)				
		The Instruction	on Guide explains how to	complete	e this form.			
1.	Total pages Schedule F: 89	2. FILER NAME Stephen Adler		3.	ACCOUNT	# (Ethics Commission Filers)		
4	Date	5 Payee name	í	•				
	08/15/2014	Marco A Orrantia	•					
3	Amount \$1,584.00	7 Payee address:	City:	Sta	ie:	Zip Code		
	,	7200 Easy Wind Dr Unit 1	029 Austin, TX 78752-000	3				
3	PURPOSE OF EXPENDITURE	(a) Category (See categories lis Salaries/Wages/Contract Labor	sted at the top of this schedule)	Salary		evel outside of Texas, complete Schedule 1		
ē	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me ·	Office so		Office held		
4	Date	5 Payee name						
	08/29/2014	Marco A Orrantia						
6	Amount \$1,584.00	7 Payee address:	City:	Sta	te:	Zip Code		
		7200 Easy Wind Dr Unit 1	029 Austin, TX 78752-000	3		·		
В	PURPOSE OF EXPENDITURE	(a) Category(See categories lis Salaries/Wages/Contract Labor	sted at the top of this schedule)	(b) De Salary		avel outside of Texas, complete Schedule 1		
				Che	ck if Austin, TX,	officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ime	Office so	ought	Office held		
4	Date	5 Payee name						
	09/15/2014	Marco A Orrantia				•		
6	Amount \$1.584.00	7 Payee address:	City:	Sta	te:	Zip Code		
	·	7200 Easy Wind Dr Unit I	1029 Austin, TX 78752-000	3				
8	PURPOSE OF EXPENDITURE	(a) Category(See categories li Salaries/Wages/Contract Labor	sted at the top of this schedule)	Salary	•	avel outside of Texas, complete Schedule		
_	O			Office of		, officeholder living expense		
u	Commission CIVII V it direct	I Communicate de la Action de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación de la Communicación		1 Mina 04	SUBBI	( )#ico hold		

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

expenditure to benefit C/OH

## **SCHEDULE F**

		EXPENDITURE CATEGORIES FOR BOX 8(a)					
Accounting/Banking Legal Consulting Expense Food Pollin		Awards/Memorials Expense al Services di/Beverage Expense ng Expense ting Expense	Salaries/Wages/Contract L Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	xpense xpense	Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)		
1	. Total pages Schedule F:	2. FILER NAME	- Calde explains now to			# (Ethics Commission Filers)	
'	89	Stephen Adler		. 3	. ACCOUNT	# (Ethics Commission Filers)	
1	Date	5 Payee name					
7	07/01/2014	Jovita Pardo			1		
6	Amount	7 Payee address:	City:	Sta	ate:	Zip Code	
•	\$1,068.46	r Payee address.	Oily.	, 0		2.5 0000	
		404 W Milton St Austin, T	X 78704-3020				
8	PURPOSE OF	(a) Category (See categories lis	sted at the top of this schedule)	(b) De	escription (If tra	vel outside of Texas, complete Schedule T	
	EXPENDITURE	Salaries/Wages/Contract Labor		Salary			
				□ Ch	eck if Austin, TX,	officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office s	ought	Office held	
4	Date	5 Payee name					
	07/15/2014	Jovita Pardo	•				
6	Amount \$952.94	7 Payee address:	City;	Sta	ate:	Zip Code	
	·	404 W Milton St Austin, T	X 78704-3020	·			
8	PURPOSE OF EXPENDITURE	(a) Category(See categories lis Salaries/Wages/Contract Labor	sted at the top of this schedule)	(b) De Salar	•	vel outside of Texas, complete Schedule T	
				Cr	ieck if Austin, TX,	officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office s	ought	Office held	
4	Date	5 Payee name					
	07/31/2014	Jovita Pardo					
6	Amount \$952.94	7 Payee address:	City:	Sta	ate:	Zip Code	
		404 W Milton St Austin, T	X 78704-3020			,	
8	PURPOSE OF EXPENDITURE	(a) Category (See categories lis Salaries/Wages/Contract Labor	sted at the top of this schedule)	Salar	у	ivel outside of Texas, complete Schedule T	
_						officeholder living expense	
ч	Complete ONLY if direct	-lCandidate/Officeholder na	ma	Office s	ouant	Office held	

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

expenditure to benefit C/OH

Printing Expense

## **SCHEDULE F**

## **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense
Event Expense Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

(512) 463-5800

	OTHER (enter a category not listed above)	
	The Instruction Guide explains how to	complete this form.
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT # (Ethics Commission Filers)
89	Stephen Adler	
4 Date	5 Payee name	
08/15/2014	Jovita Pardo	
6 Amount \$952.93	7 Payee address: City:	State: Zip Code
	404 W Milton St Austin, TX 78704-3020	
B PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T
EXI ENDITORIE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
08/31/2014	Jovita Pardo	
6 Amount \$952.94	7 Payee address: City:	State: Zip Code
\$932.94	404 W Milton St Austin, TX 78704-3020	•
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T Salary
EXI ENDITORE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
09/15/2014	Jovita Pardo	
6 Amount \$1,049.38	7 Payee address: City:	State: Zip Code
	404 W Milton St Austin, TX 78704-3020	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T Salary
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

## SCHEDULE F

					· · · · · · · · · · · · · · · · · · ·		
EXPENDITURE CATEGOR				S FOR BOX 8(a)			
Accounting/Banking Legal Ser Consulting Expense Food/Bev Event Expense Polling Ex		'Awards/Memorials Expense al Services d/Beverage Expense ing Expense ting Expense	Salaries/Wages/Contract L Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	pense Tra Coi Cai	Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee		
		The Instructi	on Guide explains how to	complete thi	s form.		
1	. Total pages Schedule F:	2. FILER NAME		3. AC	COUNT # (Ethics Commission Filers)		
	89	Stephen Adler					
4	Date	5 Payee name					
	09/02/2014	Politechs, Inc.					
6	Amount \$55.00	7 Payee address:	City:	State:	Zip Code		
			170352 Austin, TX 78717-				
8	PURPOSE OF EXPENDITURE	(a) Category (See categories li Office Overhead/Rental Expense	sted at the top of this schedule)	Directory	otion (If travel outside of Texas, complete Schedule T		
_	Consolate CMI V Maliana	0 01 000 1 1			Austin, TX, officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sough	t Office held		
4	Date	5 Payee name					
	07/01/2014	Rene A Prieto-Polymeris					
6	Amount -	7 Payee address:	City:	State:	Zip Code `		
	\$1,016.12	2215 Town Lake Cir Aust	in, TX 78741-3079				
8	PURPOSE OF	(a) Category (See categories in	isted at the top of this schedule)	(b) Descri	otion (If travel outside of Texas, complete Schedule 1		
	EXPENDITURE	Salaries/Wages/Contract Labor		Salary			
				Check if	Austin, TX, officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sough	office held		
4	Date	5 Payee name			•		
	07/15/2014	Rene A Prieto-Polymeris			·		
6	• Amount \$1,016.11	7 Payee address:	City:	State:	Zip Code		
		2215 Town Lake Cir Aust	tin, TX 78741-3079				
8	PURPOSE OF	(a) Category(See calegories li	isted at the top of this schedule)	(b) Descri	ption (If travel outside of Texas, complete Schedule 1		
	EXPENDITURE	Salaries/Wages/Contract Labor		Salary			
				Check if	Austin, TX, officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sough	office held		

ATTACH ADDITIONAL	CODIES OF THIS	SCHEDULE	AS NEEDED

### SCHEDULE F

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense

Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Fees Prir	ting Expense Office Overhead/Rent	al Expense OTHER (enter a ca	ategory not listed above)
	The Instruction Guide explains ho	w to complete this form.	
Total pages Schedule F:     89	2. FILER NAME Stephen Adler	3. ACCOUNT # (E	thics Commission Filers)
4 Date 07/31/2014	5 Payee name Rene A Prieto-Polymeris		
6 Amount \$1,016.11	7 Payee address: City: 2215 Town Lake Cir Austin, TX 78741-3079	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedus Salaries/Wages/Contract Labor	(b) Description (If travel out Salary  Check if Austin, TX, officeh	side of Texas, complete Schedule T
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 08/15/2014	5 Payee name Rene A Prieto-Polymeris		
6 Amount \$1,016.11	7 Payee address: City: 2215 Town Lake Cir Austin, TX 78741-3079	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedu Salaries/Wages/Contract Labor	(b) Description (If travel out Salary  Check if Austin, TX, officer	side of Texas, complete Schedule T
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 08/29/2014	5 Payee name Rene A Prieto-Polymeris		
6 Amount \$1,016.12	7 Payee address: City:  2215 Town Lake Cir Austin, TX 78741-3079	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedus Salaries/Wages/Contract Labor	(b) Description (If travel out Salary  Check if Austin, TX, office)	Iside of Texas, complete Schedule 1
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

#### SCHEDULE F

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense

Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

•		OTTICK (enter a category not listed above)
	The Instruction Guide explains how to	o complete this form.
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT # (Ethics Commission Filers)
89	Stephen Adler	
4 Date	5 Payee name	
09/15/2014	Rene A Prieto-Polymeris	
6 Amount \$1,016.11	7 Payee address: City:	State: Zip Code
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2215 Town Lake Cir Austin, TX 78741-3079	•
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description(If travel outside of Texas, complete Schedule Salary
•		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
07/20/2014	Ranch 616	T.
6 Amount	7 Payee address: City:	State: Zip Code
\$25.38	616 Nueces St Austin, TX 78701-2812	
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule
8 PURPOSE OF EXPENDITURE	Food/Beverage Expense	Meeting
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
07/16/2014	Randalls	
6 Amount	7 Payee address: City:	State: Zip Code
\$164.42	2025 W Ben White Blvd Austin, TX 78704-7518	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Event Expense	(b) Description(If travel outside of Texas, complete Schedule Food/Beverage
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

## SCHEDULE F

		EXPE	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Accounting/Banking Legal Consulting Expense Food Event Expense Polli	Awards/Memorials Expense al Services d/Beverage Expense ting Expense	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	xpense Transportatio Contributions Candidate/Of OTHER (enter	nent/Reimbursement on Equipment & Related Expense de /Donations Made By ficeholder/Political Committee or a category not listed above)		
4	Total pages Pehadula Fr	2. FILER NAME	ion Guide explains how to	·	# (Ethics Commission Filers)		
	. Total pages Schedule F: 89	Stephen Adler		S. ACCOUNT	# (Ethics Commission Filers)		
1	Date	5 Payee name					
~	07/19/2014	Randalls					
6	Amount	7 Payee address:	City:	State:	Zip Code		
•	\$31.98	2025 W Ben White Blvd	·	out.	2.9 0000		
8	PURPOSE OF EXPENDITURE	(a) Category(See categories Food/Beverage Expense	listed at the top of this schedule)	Food for Reception	vel outside of Texas, complete Schedule T		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder n	ame	Office sought	officeholder living expense Office held		
4	Date	5 Payee name					
	08/05/2014	Randalls					
6	Amount \$15.00	7 Payee address: 2025 W Ben White Blvd	City: Austin, TX 78704-7518	State:	Zip Code		
8	PURPOSE OF EXPENDITURE	(a) Category(See categories Office Overhead/Rental Expense	listed at the top of this schedule)	Office Supplies	vel outside of Texas, complete Schedule 1		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder n	ame	Office sought	Office held		
4	Date	5 Payee name	<del></del>				
	08/28/2014	Randalls					
6	Amount \$36.73	7 Payee address: 2025 W Ben White Blvd	City: Austin, TX 78704-7518	State:	Zip Code		
		I .					

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(a) Category(See categories listed at the top of this schedule)
Event Expense

Candidate/Officeholder name

Office held

(b) Description (If Iravel outside of Texas, complete Schedule T)

Check if Austin, TX, officeholder living expense

Food/Beverage

Office sought

**PURPOSE OF EXPENDITURE** 

Complete ONLY if direct expenditure to benefit C/OH

P.O. Box 12070

## **SCHEDULE F**

	EXPE	NDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Legal Consulting Expense Food Event Expense Polling	Awards/Memorials Expense al Services d'Beverage Expense ing Expense The Instruct	rpense Transportation Contributions/ Candidate/Off	epayment/Reimbursement ortation Equipment & Related Expense utions/Donations Made By ate/Officeholder/Political Committee (enter a category not listed above)		
Total pages Schedule F:	2. FILER NAME	ion dance explains now to	·	# (Ethics Commission Filers)	
89	Stephen Adler		0. 7,0000	, ( <u></u> ,	
4 Date	5 Payee name				
09/20/2014	Randalls				
6 Amount	7 Payee address:	City:	State:	Zip Code	
\$47.23	rayee address.	Ony.	Oldio.	2.5 0000	
	2025 W Ben White Blvd	Austin, TX 78704-7518			
PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedu Food/Beverage		
				officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held	
4 Date	5 Payee name				
09/21/2014	Randalls				
6 Amount	7 Payee address:	City:	State:	Zip Code	
\$68.30	2025 W Ben White Blvd	Austin, TX 78704-7518			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories Event Expense	listed at the top of this schedule)	(b) Description (If trav Food/Beverage	el outside of Texas, complete Schedule T	
			Check if Austin, TX, o	officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder n	ame	Office sought	Office held	
4 Date	5 Payee name				
09/02/2014	Rindy & Associates				
6 Amount	7 Payee address:	City:	State:	Zip Code	
\$2,801.91	2401 E 6th St Apt 1007 A	Austin, TX 78702-3975			
8 PURPOSE OF	(a) Category (See categories	listed at the top of this schedule)	(h) Description (If Iray	vel outside of Texas, complete Schedule 1	
8 PURPOSE OF EXPENDITURE	Printing Expense	action top of this solicable)	Printing walk cards	e. e. venes, complete conceder t	
			l <u> </u>	officeholder living expense	
9 Complete ONLY if direct	Candidate/Officeholder n	ame	Office sought	Office held	
expenditure to benefit C/OH	Condidate/Ontended II	on no			

## SCHEDULE F

,		EXPE	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Legal Consulting Expense Food Event Expense Polli		ft/Awards/Memorials Expense gal Services ood/Beverage Expense olling Expense inting Expense	Services Solicitation/Fundraising Exp Beverage Expense Travel In District Travel Out Of District		Transportations	ment/Reimbursement on Equipment & Related Expense s/Donations Made By fficeholder/Political Committee	
		mang Expense	Onice Overnous rental E.	Apolise.	OTHER (ent	er a category not listed above)	
		The Instruct	ion Guide explains how to	complete	this form.		
1.	Total pages Schedule F	2. FILER NAME		3.	ACCOUNT	# (Ethics Commission Filers)	
	89	Stephen Adler				·	
4	Date	5 Payee name					
_	09/18/2014	Rindy & Associates					
6	Amount \$150,000.00	7 Payee address:	City:	Stat	<b>a</b> :	Zip Code	
		2401 E 6th St Apt 1007 A	ustin, TX 78702-3975				
В	PURPOSE OF EXPENDITURE	(a) Category(See categories I Advertising Expense	isted at the top of this schedule)	(b) Des		avel outside of Texas, complete Schedule T	
						, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder na	ame	Office so	ught	Office held	
4	Date	5 Payee name				/	
	09/09/2014	Riverside Grocery					
6	Amount	7 Payee address:	. City:	Stat	e: .	Zip Code	
	\$47.05	1727 E Riverside Dr Aus	tin, TX 78741-1319		,		
8	PURPOSE OF EXPENDITURE	(a) Category (See categories Event Expense	tegory(See categories listed at the top of this schedule)			avel outside of Texas, complete Schedule T	
				Che	ck if Austin, TX	, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder n	ame	Office so	ught	Office held	
4	Date	5 Payee name	;				
	07/19/2014	Royal Blue Grocery					
6	Amount \$213.25	7 Payee address:	City:	Stat	e:	Zip Code	
		247 W 3rd St Austin, TX	78701-3879			•	
8	PURPOSE OF	(a) Category (See categories	listed at the top of this schedule)			avel outside of Texas, complete Schedule 1	
	EXPENDITURE	Évent Expense		l	-	or meet and greet	
_	<u> </u>					, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder n	ame	Office so	ught	Office held	

## **SCHEDULE F**

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Accounting/Banking Legal Consulting Expense Food/I Event Expense Polling		Legal Services Food/Beverage Expense Polling Expense Printing Expense	//Beverage Expense Travel In District ng Expense Travel Out Of District		xpense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)		
1. Tota	l pages Schedule				·····	T # (Ethics Commission Filers)	
89	, -	Stephen Adler				,	
4 Date	<del></del>	5 Payee name	•		·		
07/29	/2014	Royal Blue Groo	ery				
6 Amoi	unt \$126.6	7 Payee address	: City:	(	State:	Zip Code	
	\$120.		ıstin, TX 78701-3879				
	PURPOSE OF EXPENDITURE	(a) Category <sup>(See o</sup> Event Expense	categories listed at the top of this sol	Foo	Food and Beverage for meet and greet		
9 Com	plete ONLY if direc	t Candidate/Officel	holder name		sought	X, officeholder living expense Office held	
	nditure to benefit Ca		noider name	Omoc	, 00ag. k	011100 11012	
4 Date 08/23		5 Payee name Royal Blue Groo	ery				
6 Amo	unt \$219.	1	stin, TX 78701-3879		State:	Zip Code	
	PURPOSE OF EXPENDITURE	(a) Category (See of Event Expense	categories listed at the top of this sc	1	od and Beverage	travel outside of Texas, complete Schedule T for meet and greet X, officeholder living expense	
	plete ONLY if direct		holder name	Office	sought	Office held	
4 Date	!	5 Payee name	. ,				
07/01	/2014	Erik A Salinas					
6 Amo	unt \$421.	7 Payee address	City:		State:	Zip Code	
		5008 Hauna Ln	Dickinson, TX 77539-5491				
	PURPOSE OF EXPENDITURE	(a) Category (See Salaries/Wages/Contra	categories listed at the top of this so act Labor	Sal	ary	travel outside of Texas, complete Schedule T X, officeholder living expense	
	plete ONLY if direc		holder name		sought	Office held	
exp <del>e</del>	nditure to benefit C	/OH			•	<b>'</b>	

ATTACH ADDITIONAL		

### SCHEDULE F

		EXPEN	DITURE CATEGORIES	FOR E	JOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees  Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense			Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense		Transportation Equipment & Related Expense Contributions/Donations Made By Condidate/Officeholder/Political Committee			
_	Tatal same Cabadala E.		on Guide explains how to					
١.	Total pages Schedule F: 89	2. FILER NAME			3. ACCOUR	NT # (Ethics Commission Filers)		
_	<del></del>	Stephen Adler						
4	Date	5 Payee name						
_	07/15/2014	Erik A Salinas	0:6.0		lata:	Zin Codo		
j	Amount \$754.15	7 Payee address: 5008 Hauna Ln Dickinson,	City: TX 77539-5491	Si	tate:	Zip Code		
3	PURPOSE OF EXPENDITURE	(a) Category (See categories lis Salaries/Wages/Contract Labor	ted at the top of this schedule)	Salary		Description (If travel outside of Texas, complete Schedule lary  Check if Austin, TX, officeholder living expense		
_ a	Complete ONLY if direct	Candidate/Officeholder nar			sought	Office held		
•	expenditure to benefit C/OH	Carididate/Onicendider har	ne	Office .	30agm	Office ricid		
4	Date	5 Payee name						
	07/31/2014	Erik A Salinas						
ŝ	Amount \$754.15	7 Payee address:	City:	St	tate:	Zip Code		
	·	5008 Hauna Ln Dickinson,	TX 77539-5491					
3	PURPOSE OF EXPENDITURE	(a) Category(See categories lis Salaries/Wages/Contract Labor	ted at the top of this schedule)	(b) D Salar		f travel outside of Texas, complete Schedule T		
				c	heck if Austin,	TX, officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder nar	me ·	Office:	sought	Office held		
4	Date	5 Payee name						
	08/15/2014	Erik A Salinas			÷			
6	Amount \$754.15	7 Payee address:	City:	S	tate:	Zip Code		
		5008 Hauna Ln Dickinson,	TX 77539-5491					
8	PURPOSE OF EXPENDITURE	(a) Category (See calegories lis Salaries/Wages/Contract Labor	ted at the top of this schedule)	Salar	ry	f travel outside of Texas, complete Schedule T		
	0 1.000000	0 111 (107)				TX, officeholder living expense		
9	Complete ONLY if direct	Candidate/Officeholder na	me	Office	sought	Office held		

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

expenditure to benefit C/OH

expenditure to benefit C/OH

# **POLITICAL EXPENDITURES**

P.O. Box 12070

### **SCHEDULE F**

(512) 463-5800

		EXPEN	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Accounting/Banking Legal Consulting Expense Food Event Expense Polli		t/Awards/Memorials Expense gal Services od/Beverage Expense Iling Expense nting Expense	Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense		Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee			
			on Guide explains how to					
1	. Total pages Schedule F:			3.	ACCOUNT	Γ# (Ethics Commission Filers)		
	89	Stephen Adler						
4	Date	5 Payee name						
	08/29/2014	Erik A Salinas						
6	Amount \$754.15	7 Payee address: 5008 Hauna Ln Dickinson	City: TX 77539-5491	Stat	e:	Zip Code		
			•.'					
8	PURPOSE OF EXPENDITURE	(a) Category(See categories lis Salaries/Wages/Contract Labor	sted at the top of this schedule)	Salary	•	avel outside of Texas, complete Schedule T		
_		`				officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder na	me	Office so	ught	Office held		
4	Date	5 Payee name						
	09/15/2014	Erik A Salinas						
6	\$754.15	7 Payee address: 5008 Hauna Ln Dickinson	City: , TX 77539-5491	Sta	<b>e</b> :	Zip Code		
8	PURPOSE OF	(a) Category(See categories list	sted at the top of this schedule)	(h) De	ecription (If tr	avel outside of Texas, complete Schedule T		
_	EXPENDITURE	Salaries/Wages/Contract Labor	·	Salary		, officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder na	ime	Office so	ught	Office held		
4	Date	5 Payee name						
	08/19/2014	Santa Rita Tex-Mex Canti	na					
6	6 Amount \$79.57	7 Payee address:	City:	Sta	e:	Zip Code		
		5900 W Slaughter Ln Ste	D-550 Austin, TX 78749-65	511				
8	PURPOSE OF EXPENDITURE	(a) Category(See categories list Event Expense	sted at the top of this schedule)		scription (If tr or Meet & Gre	avel outside of Texas, complete Schedule T		
				Che	ck if Austin, TX	c officeholder living expense		
9	Complete ONLY if direct	Candidate/Officeholder na	ime	Office so	ught	Office held		

## SCHEDULE F

		EXPE	NDITURE CATEGORIES	FOR E	3OX 8(a)	
Accounting/Banking Legal Consulting Expense Food Event Expense Polli		Awards/Memorials Expense I Services I/Beverage Expense ng Expense ing Expense	Salaries/Wages/Contract L Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex ion Guide explains how to	pense pense	Transportati Contribution Candidate/O OTHER (en	rment/Reimbursement ion Equipment & Related Expense is/Donations Made By Officeholder/Political Committee ter a category not listed above)
1	Total pages Schedule F:	2. FILER NAME	on Guide explains now to	<u> </u>		Γ # (Ethics Commission Filers)
١.	89	Stephen Adler			3. ACCOON	# (Ettics Continuesion Filers)
_		<del> </del>				
4	Date	5 Payee name				
_	07/01/2014	Christian P Smith	O'th			7:- Code
6	Amount	7 Payee address:	City:	5	tate:	Zip Code
	\$991.11	2810 Salado St Apt 129 A	ustin, TX 78705-3629			·
8	PURPOSE OF EXPENDITURE	(a) Category (See categories li Salaries/Wages/Contract Labor	sted at the top of this schedule)	Salary		avel outside of Texas, complete Schedule T
9	Complete ONLY if direct	Candidate/Officeholder na			sought	Office held
•	expenditure to benefit C/OH	Candidate/Officeriolder file	21110	••		<b>53</b>
4	Date	5 Payee name				· ·
	07/15/2014	Christian P Smith				
6	Amount	7 Payee address:	City:	S	state:	Zip Code
	\$991.12	2810 Salado St Apt 129 A	austin, TX 78705-3629			
8	PURPOSE OF	(a) Category (See categories I	isted at the top of this schedule)	(b) C	Description (If tr	avel outside of Texas, complete Schedule T
	EXPENDITURE	Salaries/Wages/Contract Labor		Sala	гу	
				<u> </u>	Check if Austin, TX	(, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office	sought	Office held
4	Date	5 Payee name				
	07/31/2014	Christian P Smith				
6	Amount	7 Payee address:	City:	8	State:	Zip Code
	\$991.11	2810 Salado St Apt 129 A	Austin, TX 78705-3629			
8	PURPOSE OF	(a) Category (See categories I	listed at the top of this schedule)	(b) I	Description (If t	ravel outside of Texas, complete Schedule T
•	EXPENDITURE	Salaries/Wages/Contract Labor	,	Sala	•	
	<del>-</del> -				Check if Austin, TX	C, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office	sought	Office held

P.O. Box 12070

### SCHEDULE F

-				
Accounting/Banking Consulting Expense Event Expense	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	Pense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	
		ion Guide explains how to	<del></del>	
<ol> <li>Total pages Schedule</li> </ol>		r	3. ACCOUNT	Γ# (Ethics Commission Filers)
89	Stephen Adler	,		
4 Date	5 Payee name			
08/15/2014	Christian P Smith			
6 Amount \$991.1	7 Payee address: 1 2810 Salado St Apt 129 A	City: Austin, TX 78705-3629	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category(See categories Salaries/Wages/Contract Labor	listed at the top of this schedule)	Salary	avel outside of Texas, complete Schedule T
9 Complete ONLY if direct expenditure to benefit C/		ame	Office sought	Office held
4 Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·		
08/29/2014	Christian P Smith			•
6 Amount \$991.1	7 Payee address: 2 2810 Salado St Apt 129 A	City: Austin, TX 78705-3629	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category(See categories Salaries/Wages/Contract Labor	listed at the top of this schedule)	Salary	avel outside of Texas, complete Schedule T
9 Complete ONLY if direct expenditure to benefit C/		ame	Office sought	Office held
4 Date	5 Payee name		·	
09/15/2014	Christian P Smith			
6 Amount \$991.1	7 Payee address: 1 2810 Salado St Apt 129 /	City: Austin, TX 78705-3629	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category(See categories Salaries/Wages/Contract Lobor	listed at the top of this schedule)	Salary	avel outside of Texas, complete Schedule T
9 Complete ONLY if direc	t Candidate/Officeholder n	ame	Office sought	Office held
expenditure to benefit C/		•	ŭ	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDE
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P.O. Box 12070

### **SCHEDULE F**

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	rpense Transportation Contributions Candidate/O	ment/Reimbursement on Equipment & Related Expense s/Donations Made By fficeholder/Political Committee er a category not listed above)
		tion Guide explains how to	complete this form.	
<ol> <li>Total pages Schedule</li> </ol>	F: 2. FILER NAME		3. ACCOUNT	# (Ethics Commission Filers)
89	Stephen Adler			
4 Date	5 Payee name			
07/29/2014	South Austin Democrats			•
6 Amount \$270.	7 Payee address:	City:	State:	Zip Code
	PO Box 152592 Austin, T	TX 78715-2592		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories Contributions/Donations Made B Committee	listed at the top of this schedule) y Candidate/Officeholder/Political	Event Sponsorship	vel outside of Texas, complete Schedule T) officeholder living expense
Complete ONLY if direct expenditure to benefit C		ame	Office sought	Office held
4 Date	5 Payee name			
09/15/2014	Southside Flying Pizza			
6 Amount \$313.	7 Payee address: 90 2206 S Congress Ave Au	City: stin, TX 78704-4319	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category(See categories Event Expense	listed at the top of this schedule)	Food for Reception	avel outside of Texas, complete Schedule T
Complete ONLY if direct     expenditure to benefit C		ame	Office sought	Office held
4 Date	5 Payee name			
09/15/2014	Spec's Liquor Store			
6 Amount \$170.	7 Payee address: 91 4970 W Hwy 290 Servic	City: e Rd Austin, TX 78735	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category(See categories Event Expense	listed at the top of this schedule)	Beverages for Recept	avel outside of Texas, complete Schedule T ion , officeholder living expense
9 Complete ONLY if direct		ame	Office sought	Office held
expenditure to benefit C	./∪H			

#### SCHEDULE F

EXPENDITUR	E CATEGO	RIES FOR	вох	8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense

Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

	The Instruction Guide explains how to	complete this form.	
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT # (Ethics Commission Filers)	
89 -	Stephen Adler	· · · · · · · · · · · · · · · · · · ·	
4 Date	5 Payee name		
07/11/2014	Square, Inc.		
6 Amount \$9.63	7 Payee address: City:	State: Zip Code	
	1455 Market St Ste 600 San Francisco, CA 94103-13.	31	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Credit Card Processing Fees	
		Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
4 Date	5 Payee name		
07/25/2014	Square, Inc.		
6 Amount	7 Payee address: City:	State: Zip Code	
\$4.13			
	1455 Market St Stc 600 San Francisco, CA 94103-13:	31	
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Credit Card Processing Fees	
EXPENDITURE			
9 Complete ONLY if direct	Candidate/Officeholder name	Check if Austin, TX, officeholder living expense Office sought Office held	
expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office field	
4 Date	5 Payee name		
07/28/2014	Square, Inc.		
6 Amount	7 Payee address: City:	State: Zip Code	
\$4.13	T dyce dudiess.		
٠,	1455 Market St Ste 600 San Francisco, CA 94103-13	31	
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T	
8 PURPOSE OF EXPENDITURE	Fees	Credit Card Processing Fees	
		Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held	
expenditure to benefit C/OH			

## SCHEDULE F

		EXPE	NDITURE CATEGORIES	FOR BOX	8(a)		
Accounting/Banking Legal Consulting Expense Food Event Expense Polli		wards/Memorials Expense I Services /Beverage Expense og Expense ng Expense	Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense		Contributions/Donations Made By Candidate/Officeholder/Political Committee		<b>;</b>
		The Instruct	ion Guide explains how to	complete th	is form.		
1	. Total pages Schedule F:	2. FILER NAME		3. A	COUNT#	(Ethics Commission Filers)	)
	89	Stephen Adler		,		7	
4	Date	5 Payee name					
	07/30/2014	Square, Inc.				, <u>, , , , , , , , , , , , , , , , , , </u>	
6	Amount \$9.63	7 Payee address:	City:	State:		Zip Code	
		1455 Market St Ste 600 S	an Francisco, CA 94103-133	31 -			
8 PURPOSE OF EXPENDITURE		(a) Category(See categories listed at the top of this schedule) Fees		(b) Description(If travel outside of Texas, complete Schedule 1 Credit Card Processing Fees		ıle T	
		•		Check i	f Austin, TX, of	fficeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame .	Office sough	ht	Office held	
4	Date	5 Payee name			· · · · · · · · · · · · · · · · · · ·	<del></del>	
	08/08/2014	Square, Inc.					
6	Amount \$3.44	7 Payee address:	City:	State:		Zip Code	
		1455 Market St Ste 600 S	an Francisco, CA 94103-133	31			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories I Fees	isted at the top of this schedule)		iption (If trave d Processing	el outside of Texas, complete Schedo	ıle T
				Check i	f Austin, TX, of	fficeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office soug	ht	Office held	
4	Date	5 Payee name				<del>-</del> ·	
	08/21/2014	Square, Inc.	•				
6	Amount \$19.25	7 Payee address:	City:	State:		Zip Code	
	Ψ. 2	1455 Market St Ste 600 S	an Francisco, CA 94103-13	31			
8	PURPOSE OF	(a) Category (See categories I	listed at the top of this schedule)	(b) Descr	iption (If trave	el outside of Texas, complete Schedi	ule T
	EXPENDITURE	Fees	•		d Processing		
				Check	if Austin, TX. o	fficeholder living expense	

ATTACH ADDITIONAL	CODIES OF THIS	SCHEDIIIE	AS NEEDEL

Candidate/Officeholder name

Office sought

Complete ONLY if direct expenditure to benefit C/OH

Office held

#### SCHEDULE F

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense

Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

rees	ung Expense Onice Overnead/Rental Ex	OTHER (ente	r a category not listed above)
,	The Instruction Guide explains how to	complete this form.	
Total pages Schedule F:	2. FILER NAME		# (Ethics Commission Filers)
89	Stephen Adler		
4 Date	5 Payee name	'	
08/29/2014	Square, Inc.		
6 Amount \$4.96	7 Payee address: City:	State:	Zip Code
,	1455 Market St Ste 600 San Francisco, CA 94103-133	31	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Fees	(b) Description (If trav Credit Card Processing	rel outside of Texas, complete Schedule T Fees
		Check if Austin, TX, o	officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
09/10/2014	Square, Inc.		
6 Amount \$2.75	7 Payee address: City:	State:	Zip Code
8 PURPOSE OF	1455 Market St Ste 600 San Francisco, CA 94103-133  (a) Category (See categories listed at the top of this schedule)	(b) Description (If trav	rel outside of Texas, complete Schedule T
EXPENDITURE	Fees	Credit Card Processing	
			officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
09/12/2014	Square, Inc.		
6 Amount	7 Payee address: City:	State:	Zip Code
\$2.75	1455 Market St Ste 600 San Francisco, CA 94103-133	31	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Fees	Credit Card Processing	
0. 0	0		officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

## SCHEDULE F

## **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

1	Onde Ordinatal Cital L	OTHER (enter	a category not listed above)
	The Instruction Guide explains how to	complete this form.	
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT#	(Ethics Commission Filers)
89	Stephen Adler		
4 Date	5 Payee name	•	
09/13/2014	Square, Inc.		
6 Amount \$2.07	7 Payee address: City:	State:	Zip Code
	1455 Market St Ste 600 San Francisco, CA 94103-13	31	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If trave Credit Card Processing I	outside of Texas, complete Schedule T
		Check if Austin, TX, of	ficeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
09/17/2014	Square, Inc.		
6 Amount \$38.50	7 Payee address: City:	State:	Zip Code
	1455 Market St Ste 600 San Francisco, CA 94103-13	31	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Fees	(b) Description (If trave Credit Card Processing I	l outside of Texas, complete Schedule T ≟ees
		Check if Austin, TX, of	ficeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
09/22/2014	Square, Inc.		
6 Amount	7 Payee address: City:	State:	Zip Code
\$37.65			
,	1455 Market St Ste 600 San Francisco, CA 94103-13	31	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If trave Credit Card Processing	I outside of Texas, complete Schedule T Fees
		Check if Austin, TX, of	ficeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# SCHEDULE F

		EXPE	NDITURE CATEGORIES	FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees  Gift/Awards/Memorials Expen Legal Services Food/Beverage Expense Polling Expense Printing Expense		al Services d/Beverage Expense ng Expense ting Expense	Salaries/Wages/Contract L Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	rense Transportat Contributior Candidate/Contrese OTHER (en	rment/Reimbursement ion Equipment & Related Expense is/Donations Made By Officeholder/Political Committee iter a category not listed above)
1	Total pages Schedule F:	2. FILER NAME	on Guide explains how to	<u></u> -	T # (Ethics Commission Filers)
	89	Stephen Adler		3. A00001	T# (Ethics Commission Thers)
	Date	5 Payee name			
_	09/23/2014	Square, Inc.			
_	Amount	7 Payee address:	City:	State:	Zip Code
u	\$6.88	rayee address.	Oily.	Olaic.	, code
			an Francisco, CA 94103-133		
8	PURPOSE OF EXPENDITURE	(a) Category (See categories li Fees	isted at the top of this schedule)	(b) Description (If to Credit Card Processi	avel outside of Texas, complete Schedule T ng Fees
				Check if Austin, T	K, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	arne	Office sought	Office held
4	Date	5 Payee name			" · • · • · • · • · · · · · · · · · · ·
	07/10/2014	STG Smoot Tewes Group			•
6	Amount \$3,000.00	7 Payee address:	City:	State:	Zip Code
		818 Connecticut Ave NW	Ste 200 Washington, DC 20	0006-2742	
8	PURPOSE OF EXPENDITURE	(a) Category (See categories I Consulting Expense	isted at the top of this schedule)	(b) Description (If travel outside of Texas, complete Sche Analytical Consulting	
				Check if Austin, T	C, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4	Date	5 Payee name 2			,
	08/28/2014	STG Smoot Tewes Group	1		
6	Amount \$3,200.00	7 Payee address:	City:	State:	Zip Code
		818 Connecticut Ave NW	Ste 200 Washington, DC 2	0006-2742	
8	PURPOSE OF EXPENDITURE	(a) Category (See categories Consulting Expense	isted at the top of this schedule)	(b) Description (If to Analytical Consulting	ravel outside of Texas, complete Schedule 1
					K, officeholder living expense
9	Complete ONLY if direct	Candidate/Officeholder na	ame	Office sought	Office held

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

#### **SCHEDULE F**

		EXPE	NDITURE CATEGORIES	FOR BOX 8(	a)
	Accounting/Banking Legar Consulting Expense Foo Event Expense Polli	Awards/Memorials Expense al Services d/Beverage Expense ing Expense ting Expense	Salaries/Wages/Contract L Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	pense Tran Cont Cand	n Repayment/Reimbursement sportation Equipment & Related Expense tributions/Donations Made By didate/Officeholder/Political Committee IER (enter a category not listed above)
		The Instructi	on Guide explains how to	complete this	form.
1	Total pages Schedule F:	2. FILER NAME		3. AC	COUNT # (Ethics Commission Filers)
	89	Stephen Adler			
4	Date	5 Payee name	<u> </u>		<del></del>
	09/15/2014	Jason S Stinnett			
6	Amount \$415.57	7 Payee address:	City:	State:	Zip Code
	١	1907 1/2 E 16th Street Au			
8	PURPOSE OF EXPENDITURE	(a) Category(See categories li Salaries/Wages/Contract Labor	sted at the top of this schedule)	Salary	tion (If travel outside of Texas, complete Schedule T
_	0 1 0 0 0 0 0 0 0			<del></del>	ustin, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4	Date	5 Payee name			
	09/13/2014	Taco Xpress			
6	Amount \$95.73	7 Payee address: 2529 S Lamar Blvd Austin	City: n. TX 78704-4730	State:	Zip Code
		, ,			
8	PURPOSE OF EXPENDITURE	(a) Category (See categories li Event Expense	isted at the top of this schedule)	Food & Drin	,
<u>.</u>					austin, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4	Date	5 Payee name			
	08/27/2014	Tamale House East Austin	1	·	
6	Amount \$62.30	7 Payee address:	City:	State:	Zip Code
		1707 E 6th St Austin, TX	78702-2701		·
8	PURPOSE OF EXPENDITURE	(a) Category(See categories in Event Expense	isted at the top of this schedule)		tion (If travel outside of Texas, complete Schedule 1 verage Reception
				_   C  a	

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Office sought

Candidate/Officeholder name

Office held

Complete ONLY if direct expenditure to benefit C/OH

### SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Legal Services Solid Consulting Expense Food/Beverage Expense Trav Polling Expense Trav		Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	cpense Transportat Contribution Candidate/Contribution	rment/Reimbursement ion Equipment & Related Expense is/Donations Made By Officeholder/Political Committee ter a category not listed above)
· · · · · · · · · · · · · · · · · · ·		n Guide explains how to	<del></del>	
Total pages Schedule F:	2. FILER NAME		3. ACCOUN	T# (Ethics Commission Filers)
89	Stephen Adler		\	
4 Date	5 Payee name			
08/15/2014	TarryTown Texaco			· · · · · · · · · · · · · · · · · · ·
6 Amount	7 Payee address:	City:	State:	Zip Code
\$18.00	2400 Exposition Blvd Austi	in, TX 78703-2258		
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel In District		(b) Description (If to Gas for Campaign U	avel outside of Texas, complete Schedule T Haul
				, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder nam	ne	Office sought	Office held
4 Date	5 Payee name	•		
08/05/2014	Texas Workforce Commiss	ion		
6 Amount \$1,048.41	7 Payee address:	City:	State:	Zip Code
	. 101 E 15th St Rm 665 Aust	in, TX 78778-1442		÷
8 PURPOSE OF EXPENDITURE	(a) Category (See categories list Salaries/Wages/Contract Labor	ed at the top of this schedule)	(b) Description (If to Payroll Taxes	avel outside of Texas, complete Schedule T
			Check if Austin, TX	C, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder nar	ne	Office sought	Office held
4 Date	5 Payee name			
09/17/2014	Texas Workforce Commiss	ion		·
6 Amount \$15.73	7 Payee address:	City:	State:	Zip Code
	101 E 15th St Rm 665 Aust	in, TX 78778-1442		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories list Salaries/Wages/Contract Labor	led at the top of this schedule)	Payroll Taxes	ravel outside of Texas, complete Schedule T
9 Complete ONLY if direct	Candidate/Officeholder par	<u> </u>	Office sought	C, officeholder living expense Office held
s Complete UNLY If alrect	- ICANOIGATE/CITICENGIGET ber	ne	Onice Sociant	отисе лею

## SCHEDULE F

_					
		EXPE	NDITURE CATEGORIES	FOR BOX 8(a)	
	Accounting/Banking Lega Consulting Expense Food Event Expense Pollin	Awards/Memorials Expense I Services I/Beverage Expense ng Expense ing Expense The Instruct	Salaries/Wages/Contract L Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex ion Guide explains how to	pense Transport Contribution Candidate OTHER (6	ayment/Reimbursement ation Equipment & Related Expense ons/Donations Made By e/Officeholder/Political Committee enter a category not listed above)
1	. Total pages Schedule F:	2. FILER NAME		<del>.</del>	NT # (Ethics Commission Filers)
•	89	Stephen Adler		3. 7.0000	TT # (Ethics Commission Fricis)
4	Date	5 Payee name			
7	07/31/2014	The Tyson Organization,	Inc		
6	Amount	7 Payee address:	City:	State:	Zip Code
_	\$494.80	1351 Mistletoe Dr Fort W	•	out.	<b>1,</b> 5555
В	PURPOSE OF EXPENDITURE	(a) Category (See categories I Polling Expense	isted at the top of this schedule)	Automated Calls	f travel outside of Texas, complete Schedule T TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4	Date	5 Payee name			
	07/20/2014	The UPS Store		•	v
6	Amount \$120.00	7 Payee address: 815 Brazos St Stc A Aust	City: in, TX 78701-2514	State:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category(See categories I Office Overhead/Rental Expense	isted at the top of this schedule)	Postage	f travel outside of Texas, complete Schedule 1  TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4	Date	5 Payee name			
	08/20/2014	Thompson & Knight			v.
6	Amount \$1,500.00	7 Payee address: PO Box 660684 Dallas, T	City:	State:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category (See categories Legal Services	isted at the top of this schedule)	(b) Description (l Legal services	f travel outside of Texas, complete Schedule 1

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Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

Office held

Check if Austin, TX, officeholder living expense

Office sought

### **SCHEDULE F**

		EXPENDITURE CATEGORIES FOR BOX 8(a)			
	Accounting/Banking Legal Consulting Expense Food Event Expense Polli	Awards/Memorials Expense al Services d/Beverage Expense ng Expense ting Expense	Salaries/Wages/Contract L Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	rpense Transportal Contribution Candidate/ OTHER (er	yment/Reimbursement tion Equipment & Related Expense ns/Donations Made By Officeholder/Political Committee nter a category not listed above)
1	. Total pages Schedule F:	2. FILER NAME	ion Guide explains how to		T # (Ethics Commission Filers)
'	. Total pages Schedule F. 89	Stephen Adler		Ja. AÇCOON	T# (Ethics Commission Fiers)
1	Date	<del> :</del>			
4	08/14/2014	5 Payee name Thundercloud Subs			
_	· · · · · · · · · · · · · · · · · · ·		City	Ctata:	Zip Code
0	Amount \$51.66	7 Payee address: 903 W 12th St Austin, TX	City: K 78703-4117	y State:	·
8	PURPOSE OF	(a) Category (See categories	listed at the top of this schedule)	(b) Description (If I	ravel outside of Texas, complete Schedule T
	EXPENDITURE	Food/Beverage Expense		Meeting	
				Check if Austin, To	K, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4	Date	5 Payee name			
	09/23/2014	Thundercloud Subs			
6	Amount \$70.00	7 Payee address:	City:	State	Zip Code
		903 W 12th St Austin, T2	X 78703-4117		
8	PURPOSE OF EXPENDITURE	(a) Category (See categories Event Expense	listed at the top of this schedule)	(b) Description (If the Food for Meet & Gr	ravel outside of Texas, complete Schedule T ect
			·	Check if Austin, T	X, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder n	ame	Office sought	Office held
4	Date	5 Payee name			
	08/20/2014	Time Warner Cable	•		
6	Amount \$515.73	7 Payee address:	City:	State:	Zip Code
		PO Box 60074 City Of Ir	ndustry, CA 91716-0074		
8	PURPOSE OF EXPENDITURE	(a) Category (See categories Office Overhead/Rental Expense		Internet	travel outside of Texas, complete Schedule T
_	<u> </u>			Check if Austin, T.	X, officeholder living expense
α	Complete ONLY if direct	Condidate/Officeholder a		Office cought	Office held

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**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

# **POLITICAL EXPENDITURES**

### SCHEDULE F

-		
Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense
Consulting Expense	Food/Beverage Expense	Travel In District
Event Expense	Polling Expense	Travel Out Of District
Fees	Printing Expense	Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

	Chica Overheads (chia)	OTHER (enter a category not listed above)
	The Instruction Guide explains how to	o complete this form.
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT # (Ethics Commission Filers)
89	Stephen Adler	
4 Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·
09/23/2014	Time Warner Cable	
6 Amount \$433.97	7 Payee address: City:	State: Zip Code
	PO Box 60074 City Of Industry, CA 91716-0074	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule Internet
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
08/05/2014	Travis County Appraisal District	
6 Amount \$15.00	7 Payee address: City:	State: Zip Code
	8314 Cross Park Dr Austin, TX 78754-5121	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule Property Tax Report
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Рауее пате	
08/18/2014	Tres Amigos	
6 Amount \$84.54	7 Payee address: City:	State: Zip Code
	7535 E Highway 290 Austin, TX 78723-1641	
8 PURPOSE OF	(a) Category(See categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule
EXPENDITURE	S. on Espende	Food and Beverage for meet and greet  Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL	COPIES OF THIS SCHEDULE AS NEEDED
A LIAVE AUDITIONAL	COPIES OF THIS SCHEDULE AS NEEDED

# SCHEDULE F

## **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense

P.O. Box 12070

Polling Expense Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

, , , , , , , , , , , , , , , , , , , ,	Office Overhead/Tental L	OTHER (ente	er a category not listed above)
	The Instruction Guide explains how to	complete this form.	
1. Total pages Schedule F:	2. FILER NAME	3. ACCOUNT	# (Ethics Commission Filers)
89	Stephen Adler		
4 Date	5 Payee name	<b>1</b>	
08/15/2014	U-Haul		
6 Amount \$108.41	7 Payee address: City:	State:	Zip Code
,	5412 N Lamar Blvd Austin, TX 78751-1825		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If train Office Moving	vel outside of Texas, complete Schedule T
		Check if Austin, TX,	officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
07/17/2014	U.S. Post Office		
6 Amount \$490.00	7 Payee address: City:	State:	Zip Code
	3507 N Lamar Blvd Austin. TX 78705-1108		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If tra Postage	vel outside of Texas, complete Schedule T
		Check if Austin, TX,	officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		· · · · · · · · · · · · · · · · · · ·
07/20/2014	U. S. Post Office		
6 Amount	7 Payee address: City:	State:	Zip Code
\$102.90	3507 N Lamar Blvd Austin, TX 78705-1108		
8 PURPOSE OF	(a) Category(See categories listed at the top of this schedule) Office Overhead/Rental Expense		ivel outside of Texas, complete Schedule T
EXPENDITURE	Office Overhead/Renail Expense	Postage  Check if Austin TX	officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/OF		Onice sought	Onice Held

### **SCHEDULE F**

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense
Event Expense

Gift/Awards/Memorials Expense Legal Services

Food/Beverage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Transportation Equipment & Related Expense Contributions/Donations Made By

Loan Repayment/Reimbursement

Fees Printing Expense Office Overhead/Rental I		OTHER (enter a category not listed above)			
		The Instruct	tion Guide explains how to	complete this form.	
1,	Total pages Schedule F: 89	2. FILER NAME Stephen Adler		3. ACCOUN	T# (Ethics Commission Filers)
4	Date	5 Payee name	-		<del></del> ,
	09/08/2014	U.S. Post Office			
6	Amount \$490.00	7 Payee address: 3507 N Lamar Blvd Aust	City: tin, TX 78705-1108	State:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category (See categories Office Overhead/Rental Expense	listed at the top of this schedule)	Postage	avel outside of Texas, complete Schedule T
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder n	ame	Office sought	Office held
4	Date	5 Payee name			
	09/16/2014	U.S. Post Office			
6	Amount \$490.00	7 Payee address: 3507 N Lamar Blvd Aust	City: tin, TX 78705-1108	State:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category(See categories Office Overhead/Rental Expense	listed at the top of this schedule)	(b) Description (If to Postage	ravel outside of Texas, complete Schedule T
		<u> </u>		Check if Austin, TX, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder n	aame	Office sought	。Office held
4	Date	5 Payee name			
	07/14/2014	United States Treasury			
6	Amount \$3,843.62	7 Payee address: Eftps IIII Constitution /	City: Ave Washington, DC 20224-	State:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category (See categories Salaries/Wages/Contract Labor	listed at the top of this schedule)	Payroll Taxes	ravel outside of Texas, complete Schedule T
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder n	name	Office sought	Office held

### **SCHEDULE F**

<del></del>			<u> </u>	
	EXPE	NDITURE CATEGORIES	FOR BOX 8(a)	
Accounting/Banking Lega Consulting Expense Food Event Expense Pollir	Awards/Memorials Expense Il Services I/Beverage Expense ng Expense ing Expense	Salaries/Wages/Contract L Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	Transportation Equipment & Related Expen Contributions/Donations Made By Candidate/Officeholder/Political Committee	
•	The Instructi	ion Guide explains how to	complete this form.	
Total pages Schedule F:     89	2. FILER NAME Stephen Adler		3. ACCOUNT	# (Ethics Commission Filers)
4 Date	5 Payee name			
08/14/2014 6 Amount \$14,059.62	United States Treasury 7 Payee address: Eftps 1111 Constitution A	City: we Washington, DC 20224-	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category(See categories in Salaries/Wages/Contract Labor	isled at the top of this schedule)	Payroll Taxes	vel outside of Texas, complete Schedule T
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4 Date 09/15/2014	5 Payee name United States Treasury			
6 Amount \$9,591.62	7 Payee address:  Eftps !!!! Constitution A	City:	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See calegories I Salaries/Wages/Contract Labor	isted at the top of this schedule)	Payroll Taxes	evel outside of Texas, complete Schedule T
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4 Date 08/14/2014	5 Payee name University of Texas Office	e of the Dean of Students		
6 Amount \$10.00	7 Payee address: 100 W Dean Keeton St A	City: 5800 Austin, TX 78712-109	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories I Fees	isted at the top of this schedule)	Club Registration Fee	evel outside of Texas, complete Schedule 1
9 Complete ONLY if direct	Candidate/Officeholder na	ame	Office sought	Office held
expenditure to benefit C/OH		<del></del>	<b>J</b>	

ATTACH ADDITIONAL	COPIES OF THIS	SCHEDULE	AS NEEDED

# SCHEDULE F

EXPENDITURE	CATEGORIES	FOR	BOX	8(a)
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Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services

Food/Beverage Expense
Polling Expense

Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

rees Piliti	ung Expense Office Overnead/Rental E	OTHER (enter a categor	y not listed above)
	The Instruction Guide explains how to	complete this form.	
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT # (Ethics	Commission Filers)
89	Stephen Adler	,	·
4 Date	5 Payee name		
07/01/2014	Nicholas L Van Zandt		
6 Amount \$1,242.25	7 Payee address: City: 3001 Bonnie Rd Austin, TX 78703-2807	State: Zip	Code
8 PURPOSE OF		(If travel putride of	Towns remaints Schodule T
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Salary	
		Check if Austin, TX, officeholder li	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
07/15/2014	Nicholas L Van Zandt		
6 Amount \$1,242.25	7 Payee address: City: 3001 Bonnie Rd Austin, TX 78703-2807	State: Zip	Code _
8 PURPOSE OF	(a) Category(See categories listed at the top of this schedule)	(b) Description (If travel outside of	Texas, complete Schedule T
EXPENDITURE	Salaries/Wages/Contract Labor	Salary	,
		Check if Austin, TX, officeholder li	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
07/31/2014	Nicholas L Van Zandt		
6 Amount \$1,242.25	7 Payee address: City: 3001 Bonnie Rd Austin, TX 78703-2807	State: Zip	Code
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Salary	
		Check if Austin, TX, officeholder li	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

## SCHEDULE F

		EXPE	NDITURE CATEGORIES	FOR B	OX 8(a)	-
	Accounting/Banking Legal Consulting Expense Food Event Expense Pollin	Awards/Memorials Expense al Services d/Beverage Expense ng Expense ing Expense	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	pense	Transportation Contributions Candidate/O	ment/Reimbursement on Equipment & Related Expense s/Donations Made By fficeholder/Political Committee er a category not listed above)
_	Tables	<del></del>	ion Guide explains how to			
1,	Total pages Schedule F:	2. FILER NAME		3	. ACCOUNT	# (Ethics Commission Filers)
4	89	Stephen Adler				
4	Date	5 Payee name				
_	08/15/2014	Nicholas L Van Zandt	O'the second		-1.	7. 0.1
ь	Amount \$1,242.25	7 Payee address: 3001 Bonnie Rd Austin, T	City: `X 78703-2807	Sta	ate:	Zip Code
В	PURPOSE OF EXPENDITURE	(a) Category(See calegories li Salaries/Wages/Contract Labor	isted at the top of this schedule)	Salary	,	vel outside of Texas, complete Schedule T
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office s		Office held
4	Date	5 Payee name				
	08/29/2014	Nicholas L Van Zandt	ā			
6	Amount \$1,242.25	7 Payee address: 3001 Bonnie Rd Austin, T	City: "X 78703-2807	Sta	ate:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category(See categories   Salaries/Wages/Contract Labor	isted at the top of this schedule)	(b) De Salary		vel outside of Texas, complete Schedule 1
				Ch	eck if Austin, TX,	officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office s	ought	Office held
4	Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·			
	09/15/2014	Nicholas L Van Zandt	<u> </u>			
6	Amount \$1,242.25	7 Payee address: 3001 Bonnie Rd Austin, T	City:	·Sta	ate:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category(See calegories I Salaries/Wages/Contract Labor	isted at the top of this schedule)	Salary	y .	ovel outside of Texas, complete Schedule 1
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office s	ought	Office held

### SCHEDULE F

	EXPE	NDITURE CATEGORIES	FOR BOX 8(a)	
Accounting/Banking Legal Consulting Expense Foo Event Expense Polli	Awards/Memorials Expense al Services d/Beverage Expense ng Expense ting Expense	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex ion Gulde explains how to	xpense Transporta Contributio Candidate OTHER (e	nyment/Reimbursement Ition Equipment & Related Expense Ins/Donations Made By Officeholder/Political Committee Inter a category not listed above)
Total pages Schedule F:	2. FILER NAME	ion datae explaine non te		IT # (Ethics Commission Filers)
89	Stephen Adler		0, 1,00001	(24,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
4 Date	5 Pavee name			
08/25/2014	Walmart			
6 Amount \$317.82	7 Payee address:	City:	State:	Zip Code
	710 E Ben White Blvd Ar	ustin, TX 78704-7404		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories I Office Overhead/Rental Expense	listed at the top of this schedule)	Field Supplies	travel outside of Texas, complete Schedule T
0 0	0 111 107 111		<u> </u>	X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4 Date	5 Payee name	* 12 2 12 12 12 12 12 12 12 12 12 12 12 1		•
08/12/2014	Westminster Manor			
6 Amount	7 Payee address:	City:	State:	Zip Code
\$100.00	4100 Jackson Ave Austin	, TX 78731-6055		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories I Food/Beverage Expense	tisted at the top of this schedule)	(b) Description (If Food and Beverage	travel outside of Texas, complete Schedule T
EXI ENDITORIE			1	"X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder n.	ame .	Office sought	Office held
4 Date	5 Payee name			· · · · · · · · · · · · · · · · · · ·
09/07/2014	Whole Foods Market			
6 Amount	7 Payee address:	City:	State:	Zip Code
\$92.41		·		
	525 N Lamar Blvd Austin	n, TX 78703-5411		
8 PURPOSE OF	(a) Category (See categories	listed at the top of this schedule)	(b) Description (If	travel outside of Texas, complete Schedule 1
EXPENDITURE	Food/Beverage Expense		Food/Beverage for	
			Check if Austin, 1	TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder n	ame	Office sought	Office held

### SCHEDULE F

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
A C	Accounting/Banking L Consulting Expense F Event Expense F	Bift/Awards/Memorials Expense legal Services Food/Beverage Expense Polling Expense Printing Expense	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	xpense Transportati Contribution Candidate/C OTHER (en	rment/Reimbursement ion Equipment & Related Expense is/Donations Made By Officeholder/Political Committee ter a category not listed above)
1	Total pages Schedule F		lon Guide explains how to	<del></del>	T # (Eshina Camminaina Filam)
	Total pages Schedule r 89	ì		3. ACCOUN	Γ# (Ethics Commission Filers)
	Date	Stephen Adler			
	Date 07/01/2014	5 Payee name Jim A Wick			
	Amount		City:	State:	Zip Code
0 /	\$2,822.25	7 Payee address: 3 2611 Ektom Dr Apt D Au	•	State.	Σip Code ·
8	PURPOSE OF EXPENDITURE	(a) Category (See categories li Salaries/Wages/Contract Labor	isted at the top of this schedule)	Salary	avel outside of Texas, complete Schedule T , officeholder living expense
	Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder na	ame	Office sought	Office held
4 [	Date	5 Payee name			
0	07/15/2014	Jim A Wick			
6 /	Amount \$2,822.25	7 Payee address: 5 2611 Ektom Dr Apt D Au	City: stin, TX 78745-2629	State:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category(See categories I Salaries/Wages/Contract Labor	isted at the top of this schedule)	Salary	avel outside of Texas, complete Schedule T
	Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder na	ame	Office sought	Office held
4	Date	5 Payee name			
C	07/31/2014	Jim A Wick			
6 /	Amount \$2,822.25	7 Payee address: 5 2611 Ektom Dr Apt D Au	City:	State:	Zip Code
		1	.,		

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(a) Category (See categories listed at the top of this schedule) / Salaries/Wages/Contract Labor

Candidate/Officeholder name

PURPOSE OF EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Office held

(b) Description (If travel outside of Texas, complete Schedule T)

Check if Austin, TX, officeholder living expense

Office sought

### SCHEDULE F

	EXPE	FOR BOX 8(a)		
Accounting/Banking Leg- Consulting Expense Foo Event Expense Polli	Awards/Memorials Expense al Services d/Beverage Expense ing Expense ting Expense	Salaries/Wages/Contract   Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental E	Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)	
4. T-t-1		on Guide explains how to		
Total pages Schedule F:	2. FILER NAME		3. ACCOUN	T# (Ethics Commission Filers)
89	Stephen Adler		- <u>, l</u>	
4 Date	5 Payee name			
08/15/2014	Jim A Wick			71.00.4
6 Amount \$2,822.25	7 Payee address: 2611 Ektom Dr Apt D Au	City: stin, TX 78745-2629	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category(See categories li Salaries/Wages/Contract Labor	sted at the top of this schedule)	(b) Description (If to Salary	avel outside of Texas, complete Schedule 1
	<u> </u>	*	Check if Austin, TX	, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4 Date 08/29/2014	5 Payee name Jim A Wick			
6 Amount \$2,822.25	7 Payee address:  2611 Ektom Dr Apt D Au	City: stin, TX 78745-2629	State:	Zip Code
8 PURPOSE OF	(a) Category(See categories to	sted at the top of this schedule)	(b) Description (If to	avel outside of Texas, complete Schedule 1
EXPENDITURE	Salaries/Wages/Contract Labor		Salary	
			Check if Austin, TX	C, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4 Date	5 Payee name		× ×	
09/15/2014	Jim A Wick			
6 Amount \$2,822.25	7 Payee address:	City:	State:	Zip Code
	2611 Ektom Dr Apt D Au	stin, TX 78745-2629		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories I Salaries/Wages/Contract Labor	isted at the top of this schedule)	(b) Description (If to Salary	ravel outside of Texas, complete Schedule
			·	(, officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder na	ame	Office sought	Office held
expenditure to benefit C/OH			<b></b>	- 1 <b>0</b> 1.0.0

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# **SCHEDULE F**

		EXPE	NDITURE CATEGORIES	FOR BOX 8(a	)
Accounting/Banking Leg- Consulting Expense Foo- Event Expense Polli		wards/Memorials Expense I Services /Beverage Expense ig Expense ing Expense	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	xpense Trans Contri Candi xpense OTHE	Repayment/Reimbursement portation Equipment & Related Expense ibutions/Donations Made By idate/Officeholder/Political Committee ER (enter a category not listed above)
1	Total pages Schedule S	2. FILER NAME	on Guide explains how to	<del></del>	
'	Total pages Schedule F: 89	Stephen Adler		3. ACC	OUNT # (Ethics Commission Filers)
_	Date		<del></del>		
4	09/02/2014	5 Payee name Wildfire Contact LLC			
_	Amount		City:	State:	Zip Code
0	\$6,500.00	7 Payee address: 818 Connecticut Ave NW	Ste 200 Washington, DC 20		Zip Code
8	PURPOSE OF	(a) Category (See categories lis	sted at the top of this schedule)	(b) Description	on (If travel outside of Texas, complete Schedule T
	EXPENDITURE	Consulting Expense		Analytics	
	<u> </u>			Check if Au	stin, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office sought	Office held
4	Date	5 Payee name			
	07/01/2014	Michelle S Willoughby			
6	Amount \$942.12	7 Payee address:	City;	State:	Zip Code
		2704 Rio Grande St Apt 6	17 Austin, TX 78705-4282		
8	PURPOSE OF EXPENDITURE	(a) Category(See categories lis Salaries/Wages/Contract Labor	sted at the top of this schedule)	(b) Description	ON (If travel outside of Texas, complete Schedule T
_				<del></del>	stin, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ıme	Office sought	Office held
4	Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	07/15/2014	Michelle S Willoughby			
6	Amount \$942.11	7 Payee address:	City:	State:	Zip Code
		2704 Rio Grande St Apt 6	17 Austin, TX 78705-4282		
8	PURPOSE OF	(a) Category (See categories ti	sted at the top of this schedule)	(b) Description	on (If travel outside of Texas, complete Schedule T
	EXPENDITURE	Salaries/Wages/Contract Labor		Salary	
				Check if Au	stin, TX, officeholder living expense
9	Complete ONLY if direct	Candidate/Officeholder na	me .	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED	

### **SCHEDULE F**

EXPENDITURE CATEGORIES FOR B				FOR BOX 8(a)	•
Accounting/Banking Legal Consulting Expense Food Event Expense Polli		/Awards/Memorials Expense al Services d/Beverage Expense ing Expense iting Expense	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	pense Transp Contrib Candid	Repayment/Reimbursement ortation Equipment & Related Expense outions/Donations Made By late/Officeholder/Political Committee R (enter a category not listed above)
	· 	<del></del> .	ion Guide explains how to		
1.	Total pages Schedule F:	2. FILER NAME		3. ACCC	OUNT # (Ethics Commission Filers)
	89	Stephen Adler			
4	Date	5 Payee name			
	07/31/2014	Michelle S Willoughby	-		
6	Amount \$942.11	7 Payee address: 2704 Rio Grande St Apt 6	City: 517 Austin, TX 78705-4282	State:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category (See categories I Salaries/Wages/Contract Labor	isted at the top of this schedule)	Salary	n (If travel outside of Texas, complete Schedule T
9	Complete ONLY if direct	Candidate/Officeholder na		Office sought	Office held
•	expenditure to benefit C/OH	Candidate/Officeholder ha	arrie	Office sought	Office field
4	Date	5 Payee name			
	08/15/2014	Michelle S Willoughby			
6	Amount \$942.11	7 Payee address:	City:	State	Zip Code
		2704 Rio Grande St Apt 6	17 Austin, TX 78705-4282		
8	PURPOSE OF EXPENDITURE	(a) Category (See calegories I Salaries/Wages/Contract Labor	isted at the top of this schedule)	(b) Descriptio Salary	n (If travel outside of Texas, complete Schedule T
_	<del></del>			Check if Aus	lin, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4	Date	5 Payee name			
	08/29/2014	Michelle S Willoughby			•
6	Amount \$942.12	7 Payee address:	City: 517 Austin, TX 78705-4282	State:	Zip Code
	•	270 TOO GIVINGO OF TIPE (	1000ii, 171 10700 <b>72</b> 02		
8	PURPOSE OF EXPENDITURE	(a) Category(See categories I Salaries/Wages/Contract Labor	isted at the top of this schedule)	Salary	(If travel outside of Texas, complete Schedule T
9	Complete ONLY if direct	Candidate/Officeholder na	ame	Office sought	Office held

#### SCHEDULE F

-	EXPE	NDITURE CATEGORIES	FOR BOX 8(a)	, .
Accounting/Banking Le Consulting Expense Fe Event Expense Po	ift/Awards/Memorials Expense egal Services bod/Beverage Expense olling Expense rinting Expense	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex ion Guide explains how to	rpense Transportation Contribution Candidate/O OTHER (ent	ment/Reimbursement on Equipment & Related Expense s/Donations Made By fficeholder/Political Committee er a category not listed above)
Total pages Schedule F			<u>`</u> ,	# /Fthise Commission Filers
89			3. ACCOUNT	# (Ethics Commission Filers)
	Stephen Adler	·		<del></del>
4 Date	5 Payee name		•	
09/15/2014	Michelle S Willoughby	O'h ::	Chahai	7:- Oada
6 Amount \$942.11	7 Payee address:	City:	State:	Zip Code
3774.11	2704 Rio Grande St Apt 6	17 Austin, TX 78705-4282		
8 PURPOSE OF	(a) Category (See categories I	isted at the top of this schedule)	(b) Description (If tra	evel outside of Texas, complete Schedule T
EXPENDITURE	Salaries/Wages/Contract Labor		Salary	
			Check if Austin, TX,	officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder na	ame	Office sought	Office held
4 Date	5 Payee name			
07/10/2014	Worley Printing			•
6 Amount \$1,861.90	7 Payee address:	City:	State:	Zip Code
Ψ1,001,10	3217 N Interstate 35 Aust	in TV 79722 2203		
	3217 W Interstate 33 Aust	III, I X 76722-2203	•	ē.
	(0		I	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories I Printing Expense	isted at the top of this schedule)	Printing	avel outside of Texas, complete Schedule T
				officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder na	ame	Office sought	Office held
4 Date	5 Payee name			
07/17/2014	Worley Printing			
6 Amount	7 Payee address:	City:	State:	Zip Code
\$337.74	3217 N Interstate 35 Aust	in, TX 78722-2203		
8 PURPOSE OF	(a) Category (See categories )	isted at the top of this schedule)	(h) Description (If tra	avel outside of Texas, complete Schedule T
EXPENDITURE	Printing Expense		Printing business care	
			Check if Austin. TX	officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder na	ame	Office sought	Office held

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#### **SCHEDULE F**

expenditure to benefit C/OH  4 Date	Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)  complete this form.  3. ACCOUNT # (Ethics Commission Filers)  State: Zip Code
2. FILER NAME Stephen Adlor  4 Date 09/08/2014  5 Payee name Worley Printing 7 Payee address: City: 3217 N Interstate 35 Austin, TX 78722-2203  6 PURPOSE OF EXPENDITURE  (a) Category (See categories listed at the top of this schedule) Printing Expense  9 Complete ONLY if direct expenditure to benefit C/OH  4 Date 07/01/2014  5 Payee name Calvin R Wright  7 Payee address: City: 1919 Willow Creek Dr. Austin, TX 78741-4440	3. ACCOUNT # (Ethics Commission Filers)  State: Zip Code  (b) Description (If travel outside of Texas, complete Schedule Territing business cards  Check if Austin, TX, officeholder living expense
Stephen Adler  4 Date 09/08/2014 5 Payee name Worley Printing 7 Payee address: City: 3217 N Interstate 35 Austin, TX 78722-2203  8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Printing Expense  9 Complete ONLY if direct expenditure to benefit C/OH 4 Date 07/01/2014 5 Payee name Calvin R Wright 7 Payee address: City: 1919 Willow Creek Dr. Austin, TX 78741-4440	State: Zip Code  (b) Description (If travel outside of Texas, complete Schedule T Printing business cards  Check if Austin, TX, officeholder living expense
5 Payee name 09/08/2014 6 Amount 5 606.20 7 Payee address: City: 3217 N Interstate 35 Austin, TX 78722-2203  8 PURPOSE OF EXPENDITURE 9 Complete ONLY if direct expenditure to benefit C/OH 4 Date 07/01/2014 5 Payee name Calvin R Wright 7 Payee address: City: 1919 Willow Creek Dr. Austin, TX 78741-4440	(b) Description (If travel outside of Texas, complete Schedule T Printing business cards  Check if Austin, TX, officeholder living expense
Worley Printing  Amount  Section 20  Purpose of Expenditure  Graph of this schedule)  Complete ONLY if direct expenditure to benefit C/OH  Date  07/01/2014  Amount  Worley Printing  Calvin R Wright  Printing Expense  Calvin R Wright  Payee address: City:  Calvin R Wright  Payee address: City:  Section 20  Calvin R Wright  Payee address: City:  Section 20  City:  1919 Willow Creek Dr. Austin, TX 78741-4440	(b) Description (If travel outside of Texas, complete Schedule T Printing business cards  Check if Austin, TX, officeholder living expense
7 Payee address: City:  3217 N Interstate 35 Austin, TX 78722-2203  8 PURPOSE OF EXPENDITURE  (a) Category (See categories listed at the top of this schedule)  Printing Expense  9 Complete ONLY if direct expenditure to benefit C/OH  4 Date  07/01/2014  5 Payee name  Calvin R Wright  7 Payee address: City:  \$404.28  1919 Willow Creek Dr. Austin, TX 78741-4440	(b) Description (If travel outside of Texas, complete Schedule T Printing business cards  Check if Austin, TX, officeholder living expense
\$606.20  3217 N Interstate 35 Austin, TX 78722-2203  8 PURPOSE OF EXPENDITURE  (a) Category (See categories listed at the top of this schedule)  9 Complete ONLY if direct expenditure to benefit C/OH  4 Date 07/01/2014  5 Payee name Calvin R Wright  7 Payee address: City: 1919 Willow Creek Dr. Austin, TX 78741-4440	(b) Description (If travel outside of Texas, complete Schedule T Printing business cards  Check if Austin, TX, officeholder living expense
8 PURPOSE OF EXPENDITURE  (a) Category (See categories listed at the top of this schedule) Printing Expense  9 Complete ONLY if direct expenditure to benefit C/OH  4 Date 07/01/2014  5 Payee name Calvin R Wright  7 Payee address: City: 1919 Willow Creek Dr. Austin, TX 78741-4440	Printing business cards  Check if Austin, TX, officeholder living expense
Printing Expense  9 Complete ONLY if direct expenditure to benefit C/OH  4 Date 07/01/2014	Printing business cards  Check if Austin, TX, officeholder living expense
expenditure to benefit C/OH  4 Date 07/01/2014  5 Payee name Calvin R Wright  7 Payee address: City: 1919 Willow Creek Dr. Austin, TX 78741-4440	
expenditure to benefit C/OH  4 Date 07/01/2014  5 Payee name Calvin R Wright  7 Payee address: City: 1919 Willow Creek Dr. Austin, TX 78741-4440	Office sought Office held
07/01/2014	
6 Amount 7 Payee address: City: \$404.28 1919 Willow Creek Dr. Austin, TX 78741-4440	
7 Payee address: City: \$404.28 1919 Willow Creek Dr. Austin, TX 78741-4440	
1919 Willow Creek Dr. Austin, TX 78741-4440	State: Zip Code
	•
O Branches and I and a Communication of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the co	
8 PURPOSE OF (a) Category(See categories listed at the top of this schedule) EXPENDITURE Salaries/Wages/Contract Labor	(b) Description(If travel outside of Texas, complete Schedule T Salary
	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name	Office sought Office held
4 Date 5 Payee name	<del>"                                    </del>
07/15/2014 Calvin R Wright	
6 Amount 7 Payee address: City:	State: Zip Code
1919 Willow Creek Dr Austin, TX 78741-4440	
8 PURPOSE OF (a) Category (See categories listed at the top of this schedule) EXPENDITURE Salaries/Wages/Contract Labor	(b) Description(If travel outside of Texas, complete Schedule T

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Office sought

Candidate/Officeholder name

Complete ONLY if direct expenditure to benefit C/OH

Office held

### SCHEDULE F

		EXPENDITURE CATEGORIES FOR BOX 8(a)					
Accounting/Banking Leg Consulting Expense Foo Event Expense Poll		Awards/Memorials Expense il Services l/Beverage Expense ng Expense ing Expense	Salaries/Wages/Contract Solicitation/Fundraising E. Travel In District Travel Out Of District Office Overhead/Rental E	xpense Trans Conti	Repayment/Reimbursement sportation Equipment & Related Expense ributions/Donations Made By didate/Officeholder/Political Committee ER (enter a category not listed above)		
	·	The Instructi	ion Guide explains how to	complete this	form.		
1.	. Total pages Schedule F:	2. FILER NAME		3. ACC	OUNT # (Ethics Commission Filers)		
	89	Stephen Adler		:			
4	Date	5 Payee name					
	07/30/2014	Calvin R Wright			r		
6	Amount	7 Payee address:	City:	State:	Zip Code		
	\$729.15	1919 Willow Creek Dr Au	ustin, TX 78741-4440				
8	PURPOSE OF EXPENDITURE	(a) Category(See categories in Salaries/Wages/Contract Labor	isted at the top of this schedule)	Salary	ion (If travel outside of Texas, complete Schedule 1 ustin, TX, officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held		
4	Date	5 Payee name	<del></del>				
	08/15/2014	Calvin R Wright					
6	Amount \$729.15	7 Payee address:	City: ustin, TX 78741-4440	State:	Zip Code		
8	PURPOSE OF EXPENDITURE	(a) Category(See calegories I Salaries/Wages/Contract Labor	isted at the top of this schedule)	Salary	ion (If travel outside of Texas, complete Schedule 1		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held		
4	Date	5 Payee name					
	08/29/2014	Calvin R Wright					
6	Amount	7 Pavee address:	City:	State:	Zip Code		

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1919 Willow Creek Dr. Austin, TX 78741-4440

(a) Category (See calegories listed at the top of this schedule) Salaries/Wages/Contract Labor

Candidate/Officeholder name

PURPOSE OF EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

\$729.15

Office held

(b) Description (If travel outside of Texas, complete Schedule T)

Check if Austin, TX, officeholder living expense

Office sought

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

# POLITICAL EXPENDITURES

### **SCHEDULE F**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
_

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Printing Expense Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

	Ones Overhead/Tental E	OTHER (enter a category not listed above)
	The Instruction Guide explains how to	o complete this form.
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT # (Ethics Commission Filers)
89	Stephen Adler	,
4 Date	5 Payee name	
09/15/2014	Calvin R Wright	
6 Amount \$729.15	7 Payee address: City:	State: Zip Code
	1919 Willow Creek Dr Austin, TX 78741-4440	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Salary
9 Complete ONLY if direct	Candidate/Officeholder name	Check if Austin, TX, officeholder living expense  Office sought  Office held
expenditure to benefit C/OH	Candidate/Officerrolder name	Office adugnt Office new
4 Date	5 Payee name	
08/22/2014	. 1st Food Mart	<u> </u>
6 Amount \$8.64	7 Payee address: City: 1410 S 1st St Austin, TX 78704-3041	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule T) Office Supplies
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
09/11/2014	34th Street Catering	·
6 Amount \$200.22	7 Payee address: City:	State: Zip Code
	1005 W 34th St Austin, TX 78705-2008	
B PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule Travel cost for Meet & Greet  Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held
expenditure to benefit C/OH		

### **SCHEDULE F**

_		•			-	
		EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Legal Consulting Expense Food Event Expense Polli		Awards/Memorials Expense at Services Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense The Instruction Guide explains how to		Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)		
1	. Total pages Schedule F:	2. FILER NAME			T# (Ethics Commission Filers)	
•	89	Stephen Adler		S. ACCOON	T# (Ethics Commission Friers)	
4	Date	5 Payee name	•	<u>.                                    </u>		
•	08/22/2014	360 Valet				
6	Amount	<del>  .</del>	City:	State:	Zip Code	
6 Amount 7 Payee address: City: \$898.48 4809 Rutherglen Dr Austin, TX 78749-3744		Giate.				
8	PURPOSE OF	(a) Category (See categories li	isted at the top of this schedule)	(b) Description(If t	ravel outside of Texas, complete Schedule T	
		Event Expense		Valet for Meet & Gr		
				Check if Austin, T	X, officehalder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH			Office sought	Office held	
4	Date	5 Payee name				
	08/23/2014	7-Eleven Convenience Sto	ore			
6	Amount \$10.37	7 Payee address:	City:	State:	Zip Code	
		2624 Lake Austin Blvd A	ustin, TX 78703-4429			
8	PURPOSE OF EXPENDITURE	(a) Category (See categories li Office Overhead/Rental Expense	isted at the top of this schedule)	(b) Description (If I	ravel outside of Texas, complete Schedule T	
					X, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held	
4	Date	5 Payee name				
	09/17/2014	Amazon				
6	Amount \$83.08	7 Payee address:	City:	State:	Zip Code	
		410 Terry Ave N Seattle,	WA 98109-5210			
8	PURPOSE OF EXPENDITURE	(a) Category(See categories h Office Overhead/Rental Expense	isted at the top of this schedule)	(b) Description (If of Office Supplies	ravel outside of Texas, complete Schedule 1	
_				Check if Austin, T.	X, officeholder living expense	
9	Complete ONLY if direct	Candidate/Officeholder no	300	Office sought	Office held	

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE F

		EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Accounting/Banking Legal Consulting Expense Food Event Expense Polli	Awards/Memorials Expense al I Services d/Beverage Expense ng Expense ting Expense The Instructi	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental E.	xpense Transportation Contributions Candidate/O OTHER (ent	ment/Reimbursement on Equipment & Related Expense s/Donations Made By fficeholder/Political Committee er a category not listed above)	
1	. Total pages Schedule F:	2. FILER NAME	•	- <del></del>	# (Ethics Commission Filers)	
	89	Stephen Adler			,	
4	Date .	5 Payee name		<b>L</b>		
	09/03/2014	Angie's Mexican Restaura	ant			
6	Amount \$497.01	7 Payee address:	City:	State:	Zip Code	
		1307 E 7th St Austin, TX				
8	PURPOSE OF EXPENDITURE	(a) Category (See categories I Food/Beverage Expense	isted at the top of this schedule)	Food and Beverage fo	vel outside of Texas, complete Schedule T or meet and greet officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held	
4	Date	5 Payee name				
	07/21/2014	AT&T Mobility			•	
6	Amount \$49.05	7 Payee address:	City:	State:	Zip Code	
		PO Box 6463 Carol Stream	m, IL. 60197-6463			
8	PURPOSE OF EXPENDITURE	(a) Category(See categories I Office Overhead/Rental Expense	isted at the top of this schedule)	(b) Description (If tra	evel outside of Texas, complete Schedule 1	
				Check if Austin, TX,	officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held	
4	Date	5 Payee name	•			
	08/22/2014	AT&T Mobility				
6	Amount \$48.95	7 Payee address:	City:	State:	Zip Code	
		PO Box 6463 Carol Stream	m 11.60197-6463			

ATTACH ADDITIONAL	. COPIES OF THIS S	CHEDULE AS NEEDED

(a) Category(See categories listed at the top of this schedule)
Office Overhead/Rental Expense

Candidate/Officeholder name

PURPOSE OF EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Office held

(b) Description(If travel outside of Texas, complete Schedule T)

Check if Austin, TX, officeholder living expense

Cell phone

Office sought

#### SCHEDULE F

	EXPE	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	al Services d/Beverage Expense ing Expense ting Expense  Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex		Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)		
4. Total manage Cabadala		ion Guide explains how to		F # /File A construit of File of		
Total pages Schedule     on			3. ACCOUN	Γ# (Ethics Commission Filers)		
89	Stephen Adler					
4 Date	5 Payee name					
09/23/2014	AT&T Mobility	O				
6 Amount \$48.5	7 Payee address: PO Box 6463 Carol Strea	City: m, 1L 60197-6463	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories Office Overhead/Rental Expense	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense		avel outside of Texas, complete Schedule 7		
				, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C.		ame	Office sought	Office held		
4 Date	5 Payee name					
07/17/2014	AT&T			-		
6 Amount \$95.8	7 Payee address:	City:	State:	Zip Code		
	PO Box 5014 Carol Strea	ım, IL 60197-5014				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories Office Overhead/Rental Expense		(b) Description (If Internet	avel outside of Texas, complete Schedule 1		
			Check if Austin, TX	, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C		ame	Office sought	Office held		
4 Date	5 Payee name					
07/18/2014	AT&T					
6 Amount \$303.	7 Payee address:	City:	State:	Zip Code		
	PO Box 5014 Carol Stream	m, IL 60197-5014				
8 PURPOSE OF EXPENDITURE	(a) Category(See categories Office Overhead/Rental Expense		(b) Description (If to Internet	ravel outside of Texas, complete Schedule		
			Check if Austin, TX	k, officeholder living expense		
9 Complete ONLY if direct	t Candidate/Officeholder n	ame	Office sought	Office held		

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### SCHEDULE F

_					•	
		EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Legal Consulting Expense Food Event Expense Polling		Awards/Memorials Expense I Services Solicitation/Fundraising Exp /Beverage Expense Travel In District Travel Out Of District Office Overhead/Rental Exp  The Instruction Guide explains how to one		xpense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)		
1	Total pages Schedule F:	2. FILER NAME	on Guide explains now to		COUNT # (Ethics Commission Filers)	
•	89	Stephen Adler		3. 400	CONT # (Ethics Continuesion Fliers)	
1	Date	5 Payee name		I		
_	08/16/2014	AT&T				
_	Amount	-	City:	State:	Zip Code	
U	\$95.87	7 Payee address:	City.	State.	Zip Code	
	\$75.07	PO Box 5014 Carol Stream	n, IL 60197-5014			
8	PURPOSE OF	(a) Category (See categories lis	ited at the top of this schedule)	(b) Descripti	ion(If fravel outside of Texas, complete Schedule T	
EXPENDITURE		Office Overhead/Rental Expense		Internet	,	
		\		Check if Au	ustin, TX, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me .	Office sought	Office held	
4	Date	5 Payee name				
	09/10/2014	Austin Monitor				
6	Amount \$100.00	7 Payee address:	City:	State:	Zip Code	
		PO Box 867 Austin, TX 78	3767-0867			
8	PURPOSE OF EXPENDITURE	(a) Category (See categories list Office Overhead/Rental Expense	sted at the top of this schedule)	(b) Description	on (If travel outside of Texas, complete Schedule T	
	·			Check if Au	ustin, TX, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office sought	Office held	
4	Date	5 Pavee name				
09/10/2014 Austin Tejano Democrats						
6	Amount \$200.00	7 Payee address:	City:	State:	Zip Code	
		2544 Stoutwood Cir Austii	n, TX 78745-2720			
8	PURPOSE OF EXPENDITURE	(a) Category(See categories lis Contributions/Donations Made By Committee	sted at the top of this schedule) Candidate/Officeholder/Political	(b) Descripti Event Sponso	ion (If travel outside of Texas, complete Schedule T orship	
		Committee		Check if Au	ustin, TX, officeholder living expense	
9	Complete ONLY if direct	Candidate/Officeholder na	me	Office sought	Office held	

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### SCHEDULE F

	EXPE	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Leg Consulting Expense Foo Event Expense Pol	wards/Memorials Expense Services Severage Expense Sexpense Sexpense Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense  The Instruction Guide explains how to con		pense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)		
Total pages Schedule F:	2. FILER NAME	ion Guide explains now to		JT # (Ethics Commission Filers)	
89	Stephen Adler		J. 700001	The (Earlies Commission Flicts)	
4 Date	5 Payee name			+	
08/12/2014	Austin's Pizza	•	•		
6 Amount	7 Payee address:	Citý;	State:	Zip Code	
\$127.76	2222 Rio Grande St Bldg	110 Austin, TX 78705-5110	)		
8 PURPOSE OF	(a) Category (See categories	listed at the top of this schedule)	(b) Description (If	travel outside of Texas, complete Schedule T	
EXPENDITURE	Food/Beverage Expense		Food for Volunteers	S	
				X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		ame	Office sought	Office held	
4 Date	5 Payee name				
08/12/2014	Austin's Pizza				
6 Amount \$138.61	7 Payee address:	City:	State:	Zip Code	
	2222 Rio Grande St Bldg	110 Austin, TX 78705-5110	)		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories Food/Beverage Expense	listed at the top of this schedule)	(b) Description (If Food for Volunteers	travel outside of Texas, complete Schedule T	
,		•	Check if Austin, T	X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder n	ame	Office sought	Office held	
4 Date	5 Payee name				
08/06/2014	Aviary			•	
6 Amount \$155.25	7 Payee address:	City:	State:	Zip Code	
	2110 S Lamar Blvd Austi	in, TX 78704-5182			
8 PURPOSE OF EXPENDITURE	(a) Category(See categories Food/Beverage Expense	listed at the lop of this schedule)		travel outside of Texas, complete Schedule T	
EXI ENDITORE	,		Food and Beverage for meet and greet  Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct	Candidate/Officeholder n	ame	Office squaht	Office held	

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## **SCHEDULE F**

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Legal Consulting Expense Food Event Expense Polling	Awards/Memorials Expense al Services I/Beverage Expense ng Expense ing Expense	Salaries/Wages/Contract Solicitation/Fundraising E Travel In District Travel Out Of District Office Overhead/Rental E	xpense Transporta Contributio Candidate	ayment/Reimbursement ation Equipment & Related Expense ons/Donations Made By d/Officeholder/Political Committee enter a category not listed above)	
	The Instruct	ion Guide explains how to	complete this form	<b>1.</b>	
Total pages Schedule F:	2. FILER NAME		3. ACCOU	NT # (Ethics Commission Filers)	
89	Stephen Adler				
4 Date	5 Payee name	<u> </u>			
08/13/2014	Barton Springs Center, Lt	d.		•	
6 Amount \$5,000.00	7 Payee address:	City:	State:	Zip Code	
	501 S Congress Ave Ste 4	00 Austin, TX 78704-1731			
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T Office Rent		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	TX, officeholder living expense Office held	
4 Date	5 Payee name				
09/02/2014	Barton Springs Center, Lt			,	
6 Amount \$5,000.00	7 Payee address: 501 S Congress Ave Ste 4	City: 100 Austin, TX 78704-1731	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories I Office Overhead/Rental Expense	isted at the top of this schedule)	is schedule) (b) Description (If travel outside of Texas, Office Rent		
			Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held	
4 Date	5 Payee name				
09/20/2014	Barton Springs Center, Lt	d			
6 Amount \$43.05	7 Payee address:	City:	State:	Zip Code	
	501 S Congress Ave Ste 4	100 Austin, TX 78704-1731		·	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories I Office Overhead/Rental Expense	isted at the top of this schedule)	(b) Description (III	travel outside of Texas, complete Schedule 1	

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Candidate/Officeholder name

Complete ONLY if direct expenditure to benefit C/OH

Office held

Check if Austin, TX, officeholder living expense

Office sought

### SCHEDULE F

		EXPENDITURE CATEGORIES FOR BOX 8(a)					
Accounting/Banking Legal Consulting Expense Food Event Expense Polli		Awards/Memorials Expense I Services I/Beverage Expense Ig Expense Ing Expense The Instruction	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex on Guide explains how to	xpense Transpo Contribu Candida xpense OTHER	payment/Reimbursement rtation Equipment & Related Expense titions/Donations Made By te/Officeholder/Political Committee (enter a category not listed above)		
1	Total pages Schedule F:	2. FILER NAME	on data explains now to		JNT # (Ethics Commission Filers)		
	89	Stephen Adler			,		
4	Date	5 Payee name					
	07/20/2014	Jennie Blackton					
6	Amount \$1,491.00	7 Payee address:	City:	State:	Zip Code		
		2118C N Glenoaks Blvd B	urbank, CA 91504-2827		•		
8	PURPOSE OF EXPENDITURE	(a) Category(See categories lis Salaries/Wages/Contract Labor	ted at the top of this schedule)	(b) Description Consultation-wri	(If travel outside of Texas, complete Schedule T ter		
				Check if Austin	i, TX, officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder nat	me	Office sought	Office held		
4	Date	5 Payee name					
	09/12/2014	Burnt Orange Report LLC			· ·		
6	Amount \$500.00	7 Payee address:	City:	State:	Zip Code		
		4505 Duval St Apt 229 Au	stin, TX 78751-3227				
8	PURPOSE OF EXPENDITURE	(a) Category (See categories list Office Overhead/Rental Expense	sted at the top of this schedule)	(b) Description	(If travel outside of Texas, complete Schedule T		
				Check if Austin	ı, TX. officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office sought	Office held		
4	Date	5 Payee name					
	07/01/2014	David Butts					
6	Amount \$4,000.00	7 Payee address:	City:	State:	Zip Code		
		1914 Patton Ln Austin, TX	78723-1236				
8	PURPOSE OF EXPENDITURE	(a) Category(See categories lis Consulting Expense	sted at the top of this schedule)	(b) Description Political Strategy	(If Iravel outside of Texas, complete Schedule T Consultant		
		<u> </u>		Check if Austin	n, TX, officeholder living expense		
9	Complete ONLY if direct	Candidate/Officeholder na	me	Office sought	Office held		

### SCHEDULE F

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Accounting/Banking Leg Consulting Expense Foo Event Expense Poll	/Awards/Memorials Expense al Services d/Beverage Expense ing Expense ting Expense	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex ton Guide explains how to	Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)			
Total pages Schedule F:	2. FILER NAME	on ablae explaine that to		# (Ethics Commission Filers)		
89	Stephen Adler	•		,		
4 Date	5 Payee name		I,			
07/02/2014	David Butts					
6 Amount \$4,000.00	7 Payee address: 1914 Patton Ln Austin, T	City: X 78723-1236	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories in Consulting Expense	sted at the top of this schedule)	Political Strategy Con-	ivel outside of Texas, complete Schedule T sultant officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held		
4 Date 08/01/2014	5 Payee name David Butts					
6 Amount \$4,000.00	7 Payee address: 1914 Patton Ln Austin, T.	City: X 78723-1236	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories I Consulting Expense	isted at the lop of this schedule)	Political Strategy Con			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	officeholder living expense Office held		
4 Date 09/02/2014	5 Payee name David Butts					
6 Amount \$4,000.00	7 Payee address:	City: X 78723-1236	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories I Consulting Expense	isted at the top of this schedule)	Political Strategy Con	evel outside of Texas, complete Schedule T isultant officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held		

### SCHEDULE F

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Lega Consulting Expense Food Event Expense Pollii	Awards/Memorials Expense al Services d/Beverage Expense ng Expense ing Expense	Salaries/Wages/Contract L Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	rpense Transportation Contributions Candidate/O OTHER (enter	Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)	
Total pages Schedule F:	2. FILER NAME	ion Guide explains how to	·	# (Ethics Commission Filers)	
89	Stephen Adler		J. ACCOUNT	# (Ethics Commission i liers)	
4 Date	5 Payee name				
09/09/2014	Cafe Josie				
6 Amount	<del> </del>	City:	State:	Zip Code	
\$259.50	7 Payee address:	City.	State.	Zip Code	
3237.30	1200B W 6th St Austin, 7	CX 78703-5209			
8 PURPOSE OF EXPENDITURE	(a) Category(See categories Food/Beverage Expense	isted at the lop of this schedule)	Food/Beverage for Fu	vel outside of Texas, complete Schedule T ndraiser officeholder tiving expense	
9 Complete ONLY if direct	Candidate/Officeholder na		Office sought	Office held	
expenditure to benefit C/OH	Canadate/Oniceroider 16	arric	ooo doog		
4 Date	5 Payee name				
07/14/2014	Capital Area Democratic	Women			
6 Amount	7 Payee address:	City:	State:	Zip Code	
\$500.00	PO Box 12962 Austin, T	•	State	<b></b>	
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)		(b) Description (If tra	ivel outside of Texas, complete Schedule T	
EXPENDITURE	Contributions/Donations Made B	y Candidate/Officeholder/Political	Event Sponsorship		
	Committee		Check if Austin, TX,	officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder n	ame	Office sought	Office held	
4 Date	5 Payee name				
07/02/2014	Capitol Rubber Stamp		•		
6 Amount	7 Payee address:	City:	/ State:	Zip Code	
\$18.40	3314 S Congress Ave Au	stin, TX 78704-6441			
8 PURPOSE OF	(a) Category (See categories	listed at the top of this schedule)	(b) Description (If tra	ivel outside of Texas, complete Schedule T	
8 PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	at the top of the solicens)	Stamp	The second of Female, complete designate f	
			1 <u> </u>	officeholder living expense	
9 Complete ONLY if direct	Candidate/Officeholder n		Office sought	Office held	
expenditure to benefit C/OH	Carraidator Cinceriolder II	unio .		amou noid	

### **SCHEDULE F**

		EXPENDITURE CATEGORIES FOR BOX 8(a)					
Accounting/Banking Legal Ser Consulting Expense Food/Beve Event Expense Polling Ex		Awards/Memorials Expense all Services di/Beverage Expense ng Expense ling Expense	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	rpense Transport Contribute Candidate rpense	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)		
		The Instruct	ion Guide explains how to	complete this form	n.		
1.	Total pages Schedule F:	2. FILER NAME		3. ACCOU	NT # (Ethics Commission Filers)		
	89	Stephen Adler					
4	Date	5 Payee name			· ·		
	07/15/2014	Capitol Rubber Stamp					
6	Amount \$56.83	7 Payee address:	City:	State:	Zip Code		
		3314 S Congress Ave Au	stin, TX 78704-6441		•		
8 PURPOSE OF (a) Category (See categories listed at the top of this sch		isted at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule Campaign Name Badges  Check if Austin, TX, officeholder living expense				
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held		
4	Date	5 Payee name					
	07/29/2014	Capitol Rubber Stamp					
6	Amount \$30.85	7 Payee address: 3314 S Congress Ave Au	City: stin, TX 78704-6441	State:	Zip Code		
8	PURPOSE OF (a) Category(See categories listed at the top of this schedule)  EXPENDITURE Office Overhead/Rental Expense		isted at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule Campaign Name Badges			
				Check if Austin,	TX, officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held		
4	Date	5 Payee name					
	07/23/2014	Casa Chapala Mexican G	rill				
6	Amount \$285.00	7 Payee address: 9041 Research Blvd Ste I	City: 00 Austin, TX 78758-7059	State:	Zip Code		
8	PURPOSE OF EXPENDITURE	(a) Category(See categories Event Expense	isted at the lop of this schedule)		If travel outside of Texas, complete Schedule T		

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Candidate/Officeholder name

Complete ONLY if direct expenditure to benefit C/OH

Office held

Check if Austin, TX, officeholder living expense

Office sought

# SCHEDULE F

Advertising Expense	Gift/Award
Accounting/Banking	Legal Ser
Consulting Expense	Food/Beve
Event Expense	Polling Ex
Fees	Printing E.

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

		OTHER (enter a categ	OTHER (enter a category not listed above)			
	The Instruction Guide explain	s how to complete this form.				
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT # (Ethics	s Commission Filers)			
89	Stephen Adler					
4 Date	5 Payee name	<u> </u>				
07/01/2014	CheckMark Typesetting					
6 Amount	7 Payee address: City:	State: Z	ip Code			
\$718.78	·					
	3217 N Interstate 35 Austin, TX 78722-2203	3				
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this s Printing Expense	(b) Description (If travel outside Bumper Stickers	of Texas, complete Schedule T)			
		Check if Austin, TX, officeholde	r living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			
4 Date	5 Payee name					
07/29/2014	CheckMark Typesetting					
6 Amount	7 Payee address: City:	State: Z	ip Code			
\$8,879.90						
	3217 N Interstate 35 Austin, TX 78722-2203					
		<u>\</u>				
8 PURPOSE OF	(a) Category (See categories listed at the top of this		of Texas, complete Schedule T)			
EXPENDITURE	Printing Expense	Printing signs				
0.0		Check if Austin, TX, officeholde				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			
4 Date	5 Payee name					
08/26/2014	CheckMark Typesetting		_			
6 Amount	7 Payee address: City:	State: Z	ip Code			
\$3,781.38						
	3217 N Interstate 35 Austin, TX 78722-2200	3				
8 PURPOSE OF	(a) Category (See categories listed at the top of this	schedule) (b) Description (If travel outside	of Texas, complete Schedule T)			
EXPENDITURE	Printing Expense	Printing Signs				
		Check if Austin, TX, officeholde	r living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			

# SCHEDULE F

	-
Advertising Expense	Gift/Awards/Memorials Exper
Accounting/Banking	Legal Services
Consulting Expense	Food/Beverage Expense
Event Expense	Polling Expense
ees	Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

	The Instruction Guide explains how to	complete this form.		
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT # (Ethics Commission Filers)		
89	Stephen Adler			
4 Date	5 Payee name	<u> </u>		
09/02/2014	CheckMark Typesetting			
6 Amount \$3,040.96	7 Payee address: City:	State: Zip Code		
	3217 N Interstate 35 Austin, TX 78722-2203			
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedul T-shirts		
		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date	5 Payee name			
09/23/2014	Chez Zee			
6 Amount \$880.75	7 Payee address: City:	State: Zip Code		
	5406 Balcones Dr Austin, TX 78731-4906			
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedul Food for Meet & Greet		
		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date	5 Payee name			
07/20/2014	City of Austin			
6 Amount \$25.00	7 Payee address: City:	State: Zip Code		
	200 S Lamar Blvd Austin, TX 78704-1099			
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Event Expense	(b) Description (if travel outside of Texas, complete Schedul Parade Registration		
		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		

### SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Accounting/Banking Leg Consulting Expense For Event Expense Pol	al Services  d/Beverage Expense  ling Expense  ting Expense	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	xpense Transportation Contributions Candidate/OOTHER (ent	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)	
Total pages Schedule F:	2. FILER NAME	Guide explains how to		# (Ethics Commission Filers)	
89	Stephen Adler		0. 7.0000111	# (Earles Commission Friers)	
4 Date	5 Payee name	<u> </u>		<del></del>	
08/28/2014	City of Austin				
6 Amount	7 Payee address:	City:	State:	Zip Code	
\$113.67	PO Box 1088 PO Box 1088	Austin, TX 78767-1088			
PURPOSE OF EXPENDITURE	(a) Category(See categories liste Office Overhead/Rental Expense	d at the top of this schedule)	(b) Description (If tra	vel outside of Texas, complete Schedule T	
			Check if Austin, TX,	officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder nam		Office sought	Office held	
4 Date	5 Payee name	<del></del>			
07/21/2014	Conference Call Services				
6 Amount \$11.51	7 Payee address:	City:	State:	Zip Code	
. ۱۱۰۰	425 E Colorado St Glendale.	, CA 91205-2560	•	î.	
PURPOSE OF EXPENDITURE	(a) Category(See categories liste Office Overhead/Rental Expense	d at the top of this schedule)	(b) Description (If tra Conference Call Cost	ivel outside of Texas, complete Schedule T	
	<u> </u>		Check if Austin, TX,	officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder nam	ne	Office sought	Office held	
4 Date	5 Payee name			· · · ·	
08/21/2014	Conference Call Services				
6 Amount \$11.51	7 Payee address:	City:	State:	-Zip Code	
	425 E Colorado St Glendale	, CA 91205-2560			
8 PURPOSE OF EXPENDITURE	(a) Category(See categories liste Office Overhead/Rental Expense	at the top of this schedule)	(b) Description (If tra Conference Call Cost	ivel outside of Texas, complete Schedule T	
			Check if Austin, TX,	officeholder living expense	
9 Complete ONLY if direct	Candidate/Officeholder nam	ne	Office sought	Office held	

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

#### SCHEDULE F

	EXPE	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Lega Consulting Expense Food Event Expense Pollin	Awards/Memorials Expense Salaries/Wages/Contract Lal Services Solicitation/Fundraising Explayerage Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salaries/Wages/Contract Last Solicitation/Fundraising Expense Salari		Contributions (Contributions)  Contributions (Contributions)  Candidate (Contributions)  Candidate (Contributions)			
	т	on Guide explains how to	<del></del>			
Total pages Schedule F:     89	2. FILER NAME		3. ACCOUN	T # (Ethics Commission Filers)		
<u> </u>	Stephen Adler			<del></del>		
4 Date 09/23/2014	5 Payee name	•				
	Conference Call Services	Cit	Ptata	Zin Codo		
6 Amount \$11.51	425 E Colorado St Glenda	7 Payee address: City: State: Zip Code 425 E Colorado St Glendale, CA 91205-2560				
8 PURPOSE OF EXPENDITURE	(a) Category(See categories lit Office Overhead/Rental Expense	sted at the top of this schedule)	Conference Call Cost			
9 Complete ONLY if direct	Condidate Office helder as		Office sought	K, officeholder living expense Office held		
expenditure to benefit C/OH	Candidate/Officeholder na	me ·	Onice sought	Office field		
4 Date	5 Payee name					
07/10/2014	Costco					
6 Amount \$175.43	7 Payee address: 4301 W William Cannon I	City: Or Austin, TX 78749-1473	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category(See calegories list Office Overhead/Rental Expense	sted at the top of this schedule)	(b) Description (If It	ravel outside of Texas, complete Schedule T		
		•	1_ `	K, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office sought	Office held		
4 Date	5 Payee name		****			
09/21/2014	Costco	•				
6 Amount \$68.30	7 Payee address: 4301 W William Cannon I	City: Or Austin, TX 78749-1473	State:	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories li Food/Beverage Expense	sted at the lop of this schedule)	Food & Drink for Ev	ravel outside of Texas, complete Schedule T /ent <, officeholder living expense		
9 Complete ONLY if direct	Candidate/Officeholder na	·me	Office sought	Office held		
expenditure to benefit C/OH	- Candidate/Officerroider ha	iiiic	Office Bought	Ornice Held		

### **SCHEDULE F**

		FYPE	NOITURE CATEGORIES	S FOR BO	Y R(a)		
		EXPENDITURE CATEGORIES FOR BOX 8(a)					
Accounting/Banking Legal Consulting Expense Food Event Expense Polli		Awards/Memorials Expense al Services Solicitation/Fundraising E d/Beverage Expense Irravel In District Travel Out Of District Uning Expense Office Overhead/Rental E		Transportation Equipment & Related Expert Contributions/Donations Made By Candidate/Officeholder/Political Committee		n Equipment & Related Expense /Donations Made By ficeholder/Political Committee	
		<del></del>	on Guide explains how to				
1	. Total pages Schedule F:	2. FILER NAME		3.	ACCOUNT	# (Ethics Commission Filers)	
	89	Stephen Adler					
4	Date	5 Payee name					
	09/15/2014	Andrew Coulter					
6	Amount \$497.10	7 Payee address:	City:	State	e:	Zip Code	
		302 W38th St Apt 117 Au	stin, TX 78705				
8	PURPOSE OF	(a) Category (See categories li	sled at the top of this schedule)	(b) Des	cription (If Irav	rel outside of Texas, complete Schedule T	
	EXPENDITURE	Salaries/Wages/Contract Labor		Salary			
				Chec	ck if Austin, TX, o	officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office so	ught	. Office held	
4	Date	5 Payee name	0				
	09/10/2014	Janie Cowan					
6	Amount \$600.00	7 Payee address:	City:	State	e:	Zip Code	
		506 Blueberry HI Austin,	TX 78745-4080	•			
8	PURPOSE OF EXPENDITURE	(a) Category (See categories li Event Expense	isted at the top of this schedule)		scription (If trav	rel outside of Texas, complete Schedule T for event	
	*			Chec	ck if Austin, TX, o	officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office so	ught	Office held	
4	Date	5 Payee name					
	08/12/2014	CVS Pharmacy					
6	Amount \$34.64	7 Payee address:	City:	Stat	e:	Zip Code	
	·	500 Congress Ave Austin	, TX 78701-3502				
8	PURPOSE OF EXPENDITURE	(a) Category(See categories I Office Overhead/Rental Expense	isted at the top of this schedule)		scription <sup>(If trav</sup> Supplies	vel outside of Texas, complete Schedule T	
_	-			Che	ck if Austin, TX,	officeholder living expense	
Δ	Complete ONLY if direct	Candidate/Officeholder		Office co	uaht	Office hold	

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

#### **POLITICAL EXPENDITURES**

#### SCHEDULE F

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract L
Accounting/Banking	Legal Services	Solicitation/Fundraising Ex
Consulting Expense	Food/Beverage Expense	Travel In District
Event Expense	Polling Expense	Travel Out Of District

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

OTHER (enter a category not listed above)

Fees Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2. FILER NAME 1. Total pages Schedule F: 3. ACCOUNT # (Ethics Commission Filers) Stephen Adler 4 Date 5 Payee name 07/17/2014 David Thomas Photography 6 Amount Payee address: City: State: Zip Code \$200.00 2004B E 9th St Austin, TX 78702-3438 (a) Category (See categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE OF EXPENDITURE** Photography at event Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 07/24/2014 Deluxe City: State: Zip Code 7 Payee address: 6 Amount \$197.06 3680 Victoria St N Shoreview, MN 55126-2906 (a) Category (See categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE OF** Accounting/Banking **EXPENDITURE** Check Order Check if Austin, TX, officeholder living expense Complete ONLY if direct Office sought Office held Candidate/Officeholder name expenditure to benefit C/OH 4 Date 5 Payee name 07/01/2014 Discount Electronics City: State: Zip Code 6 Amount 7 Payee address: \$201.35 1011 W Anderson Ln Austin, TX 78757-1547 (a) Category(See categories listed at the top of this schedule)
Office Overhead/Rental Expense (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE OF EXPENDITURE** Campaign Computer Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

ΔΤ	TACH	<b>ADDITIONAL</b>	COPIES	OF THIS	SCHEDULE	24	NEEDED
_	10011	PROPERTY	COFILS	Or IIIIS	JUILLOULE	~ -	1166066

#### SCHEDULE F

		EXPE	NDITURE CATEGORIES	FOR BOX 8(a)		
	Accounting/Banking Legal Consulting Expense Food Event Expense Polli	Awards/Memorials Expense al Services d/Beverage Expense ng Expense ing Expense	Salaries/Wages/Contract L Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	pense Transporta Contributio Candidate/ OTHER (ei	yment/Reimbursement tion Equipment & Related Expens ns/Donations Made By Officeholder/Political Committee nter a category not listed above)	е
4	Total agent Cabadala E	<del></del>	on Guide explains how to	<del></del>	<del></del>	
١.	Total pages Schedule F:	2. FILER NAME		3. ACCOUN	IT # (Ethics Commission Filers	)
_	89	Stephen Adler	· ·-	*		
4	Date	5 Payee name	•			
_	07/21/2014	Dove Springs Proud			<u> </u>	
6	Amount \$100.00	7 Payee address:	City:	State:	Zip Code	
		4103 Sojourner St Austin,	TX 78725-1747			
8	PURPOSE OF EXPENDITURE	(a) Category (See categories li Contributions/Donations Made By Committee		Youth Summit Spor	travel outside of Texas, complete Sched nsorship X, officeholder living expense	ule T
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ime	Office sought	Office held	
4	Date	5 Payee name				
	07/20/2014	Eastside Cafe				
6	Amount \$29.71	7 Payee address:	City:	State:	Zip Code	
		2113 Manor Rd Austin, T	X 78722-2437			
8	PURPOSE OF EXPENDITURE	(a) Category(See categories li Food/Beverage Expense	sted at the top of this schedule)	(b) Description (If Meeting	travel outside of Texas, complete Sched	ule T
				Check if Austin, T	X, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	amė (	Office sought	Office held	
4	Date	5 Payee name				
	07/16/2014	Edward M. Shack				
6	Amount \$4,560.00	7 Payee address:	City:	State:	Zip Code	
	,	221 E 9th St Ste 202 Aust	in, TX 78701-2510			
8	PURPOSE OF EXPENDITURE	(a) Category (See categories li Legal Services	sted at the top of this schedule)	(b) Description (If Legal services	travel outside of Texas, complete Sched	ute T
				Chack if Austin T	Y officeholder living expense	

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Office sought

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

Office held

# SCHEDULE F

	,	EXPE	NDITURE CATEGORIES	FOR BO	X 8(a)	
	Accounting/Banking Leg Consulting Expense Foo Event Expense Pol	t/Awards/Memorials Expense gal Services od/Beverage Expense ling Expense The Instruction	Salaries/Wages/Contract L Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex ion Guide explains how to	xpense xpense	Transportatio Contributions Candidate/Of OTHER (ente	nent/Reimbursement in Equipment & Related Expense /Donations Made By fficeholder/Political Committee er a category not listed above)
1	Total pages Schedule F:	2. FILER NAME	Oil Guide explains flow to	<del></del> -		# (Ethics Commission Filers)
	89	Stephen Adler		٦	70000111	# (Ethics Commission Filers)
4	Date	5 Payee name				
•	09/19/2014	Einstein Bros Bagels				
_	Amount	<del></del>	City:	Stat	.a.	Zip Code
0	\$62.76	7 Payee address: . 3010 W Anderson Ln Aus	•	Siai	<del>с</del> .	Zip Code
8	PURPOSE OF	(a) Category(See categories li	isted at the top of this schedule)	(b) Des	scription (If tra-	vel outside of Texas, complete Schedule 1
	EXPENDITURE	Event Expense		Food fo	or meet and gree	et
				Che	ck if Auslin, TX,	officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office so	ught	Office held
4	Date	5 Payee name				
	08/11/2014	El Mercado, Inc.				*
6	Amount \$54.13	7 Payee address:	City:	Stat	e:	Zip Code
		1302 S 1st St Austin, TX	78704-3039			
В	PURPOSE OF EXPENDITURE	(a) Category(See categories li Event Expense	isted at the top of this schedule)		scription (If tra	vel outside of Texas, complete Schedule 1
				Che	ck if Austin, TX,	officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office so	ught -	Office held
4	Date	5 Payee name				
	08/13/2014	El Mercado, Inc.				
6	Amount \$123.37	7 Payee address:	City:	Stat	e:	Zip Code
	•	1302 S 1st St Austin, TX	78704-3039			
8	PURPOSE OF EXPENDITURE	(a) Category(See categories I Event Expense	isled at the top of this schedule)	Food fo	or event	vel outside of Texas, complete Schedule
_	<del></del>					officeholder living expense
q	Complete ONLY if direct	Candidate/Officeholder no	ama	Office so	u iaht	Office held

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expenditure to benefit C/OH

## **SCHEDULE F**

		EXPE	NDITURE CATEGORIES	FOR BOX	( 8(a)	
	Accounting/Banking Lega Consulting Expense Food Event Expense Pollir	Awards/Memorials Expense I Services /Beverage Expense ng Expense ng Expense	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	крепse 7 ( крепse (	Fransportation Contributions/ Candidate/Off DTHER (ente	nent/Reimbursement n Equipment & Related Expense /Donations Made By ficeholder/Political Committee r a category not listed above)
1	Total pages Schedule F:	2. FILER NAME	on Guide explains how to	<del>`</del>		# (Ethics Commission Filers)
1	89	Stephen Adler		3. /	ACCOUNT :	# (Ethics Continission Filers)
_	Date	·	·····			
+	07/03/2014	5-Payee name				
_		Evans & Katz LLC	O11	01.1.		31.0.1.
ő	Amount \$135.00	7 Payee address: PO Box 70980 Washingto	City: on, DC 20024-0980	State	:	Zip Code
3	PURPOSE OF EXPENDITURE	(a) Category(See categories li Accounting/Banking	sted at the top of this schedule)		cription (If trav	rel outside of Texas, complete Schedule T
_			,			officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ime	Office sou	ght	Office held
4	Date	5 Payee name				
	08/05/2014	Evans & Katz LLC				
6	Amount \$1,950.00	7 Payee address:	City:	State	:	Zip Code
		PO Box 70980 Washingto	л, DC 20024-0980			
8	PURPOSE OF EXPENDITURE	(a) Category (See categories li Accounting/Banking	sted at the top of this schedule)		cription <sup>(If trav</sup> nce Services	vet outside of Texas, complete Schedule 1
				Chec	cif Austin, TX, o	officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sou	ght	Office held
4	Date	5 Payee name				
	07/01/2014	Facebook				
6	Amount \$438.71	7 Payee address:	City:	State	:	Zip Code
	•	1601 Willow Rd Menlo P	ark, CA 94025-1452			
8	PURPOSE OF EXPENDITURE	(a) Category(See categories I Advertising Expense	isted at the top of this schedule)	online ac	dvertising	vel outside of Texas, complete Schedule 1
_						officeholder living expense
9	Complete ONLY if direct	Candidate/Officeholder na	ame	Office sou	ght	Office held

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expenditure to benefit C/OH

# SCHEDULE F

		EXPE	NDITURE CATEGORIES	FOR BOX 8(a	1)
	Accounting/Banking Leg Consulting Expense Foo Event Expense Pol	/Awards/Memorials Expense jal Services od/Beverage Expense ling Expense nting Expense	Salaries/Wages/Contract L Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	contractions Contractions Candi	Repayment/Reimbursement portation Equipment & Related Expense ibutions/Donations Made By idate/Officeholder/Political Committee ER (enter a category not listed above)
	<del></del>	<del></del> .	ion Guide explains how to	<del></del> :	
1	. Total pages Schedule F:	2. FILER NAME		3. ACC	OUNT # (Ethics Commission Filers)
	89	Stephen Adler			
4	Date	5 Payee name			•
	07/03/2014	Facebook			<u> </u>
6	Amount	7 Payee address:	City:	State	Zip Code
	\$6.99	1601 Willow Rd Menlo P	ark, CA 94025-1452		N.
8	PURPOSE OF EXPENDITURE	(a) Category (See categories I Advertising Expense	isted at the top of this schedule)	online adverti:	<b>U</b>
_					stin, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4	Date	5 Payee name			
	07/31/2014	Facebook			
6	Amount \$331.22	7 Payee address: 1601 Willow Rd Menlo P	City: ark, CA 94025-1452	State:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category (See categories I Advertising Expense	isted at the top of this schedule)	Online Adver	· ·
_		<u> </u>			istin, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4	Date	5 Payee name			
	09/02/2014	Facebook			
6	Amount \$161.50	7 Payee address: 1601 Willow Rd Menlo P	City: Park, CA 94025-1452	State:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category(See categories I Advertising Expense	isted at the top of this schedule)	(b) Descripti	on (If travel outside of Texas, complete Schedule

ATTACH ADDITIONAL		
ATTACH ADDITIONAL	COPIES OF THIS SCHEDULE	AS NEEDED

Candidate/Officeholder name

Online Advertising

Office sought

Check if Austin, TX, officeholder living expense

EXPENDITURE

Complete ONLY if direct expenditure to benefit C/OH

Office held

### SCHEDULE F

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Politic Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement

Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

Fees Print	ing Expense	Office Overhead/Rental Ex	ornse OTHE	R (enter a category not listed above)
		•		
	The Instruct	ion Guide explains how to	complete this fo	orm.
Total pages Schedule F:	2. FILER NAME		3. ACCC	OUNT # (Ethics Commission Filers)
89	Stephen Adler			
4 Date	5 Payee name		~	
09/09/2014	Family Dollar			
6 Amount	7 Payee address:	City:	State:	Zip Code
\$13.08	1917 E Riverside Dr Aust	iin, TX 78741-1332		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories I Office Overhead/Rental Expense	isted at the top of this schedule)	Office Supplies	
			<u></u>	tin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4 Date	5 Payee name			
08/31/2014	Frost Bank	i		
6 Amount \$5.00	7 Payee address: 2425 Exposition Blvd Au	City: stin, TX 78703-2270	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories I Accounting/Banking	isted at the top of this schedule)	Service Fee	ក្ (If travel outside of Texas, complete Schedule T)
0 0 1 000 4 7 7 7				tin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4 Date	5 Payee name			
07/01/2014	GNI Consulting, LLC			
6 Amount \$14,116.50	7 Payee address:	City;	State:	Zip Code
	PO Box 685008 Austin, T	TX 78768-5008		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories I Consulting Expense	listed at the top of this schedule)	Communication	n (If travel outside of Texas, complete Schedule T) n, Social Media & Political Consu tin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held

### SCHEDULE F

<b>EXPENDITURE CATEGORIES FOR</b>	8(a)
EXI CIDITOTIC OATEGOTILS FOR	O(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

	Fees Print	ing Expense	Office Overhead/Rental Ex	pense	OTHER (ente	er a category not listed above)	
		The Instruction	on Guide explains how to	complete	this form.		
1.	Total pages Schedule F: 89	2. FILER NAME Stephen Adler		3.	ACCOUNT	# (Ethics Commission Filers)	
4	Date 07/14/2014	5 Payee name GNI Consulting, LLC		I			_
6	Amount \$38,143.73	7 Payee address: PO Box 685008 Austin, T.	City: X 78768-5008	State	<b>)</b> :	Zip Code	
8	PURPOSE OF EXPENDITURE	(a) Category (See categories list Consulting Expense	sled at the top of this schedule)	Commu	nication, Socia	vel outside of Texas, complete Schedul al Media & Political Consu officeholder living expense	; T)
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office so	<b>ught</b>	Office held	
4	Date 07/19/2014	5 Payee name GNI Consulting, LLC					
6	Amount \$7,500.00	7 Payee address: PO Box 685008 Austin, T.	City: X 78768-5008	State	a:	Zip Code	
8	PURPOSE OF EXPENDITURE	(a) Category(See categories list Consulting Expense	sled at the top of this schedule)	Commu	inication, Socia	vel outside of Texas, complete Schedul al Media & Political Consu officeholder living expense	э T)
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ime .	Office so		Office held	
4	Date 08/14/2014	5 Payee name GNI Consulting, LLC					
6	Amount \$8,124.30	7 Payee address: PO Box 685008 Austin, T	City: X 78768-5008	State	3:	Zip Code	
8	PURPOSE OF EXPENDITURE	(a) Category(See categories li Consulting Expense	sted at the top of this schedule)	Commu	mication, Socia	ivel outside of Texas, complete Schedul at Media & Potitical Consu officeholder living expense	<b>⊋</b> T)
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ıme	Office so		Office held	

### SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(	а	)
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Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

		OTHER (enter a category not listed above)
	The Instruction Guide explains how to	o complete this form
Total pages Schedule F:     89	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 08/25/2014	5 Payee name GNI Consulting, LLC	
6 Amount \$5,865.00	7 Payee address: City: PO Box 685008 Austin, TX 78768-5008	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Communication, Social Media & Political Consu  Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 09/17/2014	5 Payee name GNI Consulting, LLC	
6 Amount \$7,250.16	7 Payee address: City: PO Box 685008 Austin, TX 78768-5008	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If fravel outside of Texas, complete Schedule T) Communication, Social Media & Political Consu Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 09/10/2014	5 Payee name Delwin Goss	1
6 Amount \$4,500.00	7 Payee address: City: 6410 Ponca St Austin, TX 78741-2473	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Sign Installation  Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

### **SCHEDULE F**

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

	The Instruction Guide explains how to	o complete this form.
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT # (Ethics Commission Filers)
89	Stephen Adler	(2000)
4 Date	5 Payee name	
08/18/2014	Gregoary A. Copp, Inc.	
6 Amount \$325.00	7 Payee address: City:	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) Quarterly Payroll Tax Returns
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
08/18/2014	Н-Е-В	
6 Amount	7 Payee address: City:	State: Zip Code
\$34.62	701 S Capital Of Texas Hwy West Lake Hills, TX 78	746-5243
,		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) Food for Meet & Greet
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
09/04/2014	н-Е-В	
6 Amount	7 Payee address: City:	State: Zip Code
\$37.38	701 S Capital Of Texas Hwy West Lake Hills, TX 78	746.5743
	.o. o capital of total flwy west Lake fills, 1A /o	N IO DETU
8 PURPOSE OF EXPENDITURE	(a) Category(See categories fisted at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) Food for Meet & Greet
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

#### SCHEDULE F

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

		OTHER (enter a category not listed above)	
	The Instruction Guide explains how to	o complete this form.	
Total pages Schedule F:     89	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filer	s)
4 Date 09/13/2014	5 Payee name H-E-B		
6 Amount \$17.79	7 Payee address: City: 701 S Capital Of Texas Hwy West Lake Hills, TX 78	State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Scheolice for reception  Check if Austin, TX, officeholder living expense	dule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
4 Date 09/15/2014	5 Payee name H-E-B		
6 Amount \$338.57	7 Payee address: City: 701 S Capital Of Texas Hwy West Lake Hills, TX 78	State: Zip Code 8746-5243	·
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Scher Food & Drink for reception	dule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
4 Date 07/01/2014	5 Payee name Laura N Hernandez		
6 Amount \$1,902.75	7 Payee address: City: 2408 Manor Rd 108 Austin, TX 78722-2042	State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Scher Salary  Check if Austin, TX, officeholder living expense	dule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	

# SCHEDULE F

	EXPE	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Le Consulting Expense Fe Event Expense Pe	ift/Awards/Memorials Expense egal Services ood/Beverage Expense olling Expense rinting Expense	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	rpense Transportatio Contributions Candidate/Of	nent/Reimbursement n Equipment & Related Expense /Donations Made By ficeholder/Political Committee rra category not listed above)	
<u> </u>		ion Guide explains how to			
Total pages Schedule F			3. ACCOUNT	# (Ethics Commission Filers)	
89	Stephen Adler				
4 Date	5 Payee name	•			
07/15/2014	Laura N Hernandez				
6 Amount \$1,902.75	7 Payee address: 2408 Manor Rd 108 Aust	City: in, TX 78722-2042	State:	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category(See calegories I Salaries/Wages/Contract Labor	isted at the top of this schedule)	Salary	vel outside of Texas, complete Schedule T	
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder na	ame	Office sought	Office held	
4 Date	5 Payee name				
07/31/2014	Laura N Hernandez				
6 Amount \$1,902.75	7 Payee address: 2408 Manor Rd 108 Aust	City: in, TX 78722-2042	State:	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See categories ( Salaries/Wages/Contract Labor	listed at the top of this schedule)	Salary	vel outside of Texas, complete Schedule T	
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder na	ame	Office sought	Office held	
4 Date	5 Payee name		•		
08/15/2014	Laura N Hernandez			•	
6 Amount \$1,902.75	7 Payee address: 2408 Manor Rd 108 Aust	City: in, TX 78722-2042	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories Salaries/Wages/Contract Labor	listed at the top of this schedule)	Salary	vel outside of Texas, complete Schedule T officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder n	ame	Office sought	Office held	

# SCHEDULE F

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

		OTHER (enter a category not listed above)
	The Instruction Guide explains how to	o complete this form
Total pages Schedule F:     89	2. FILER NAME Stephen Adler	3. ACCOUNT # (Ethics Commission Filers)
4 Date 08/29/2014	5 Payee name Laura N Hernandez	
6 Amount \$1,902.75	7 Payee address: City: 2408 Manor Rd 108 Austin, TX 78722-2042	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Salary  Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 09/15/2014	5 Payee name Laura N Hernandez	
6 Amount \$1,902.75	7 Payee address: City: 2408 Manor Rd 108 Austin, TX 78722-2042	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Salary  Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 09/23/2014	5 Payee name Hill's Cafe	
6 Amount \$428.67	7 Payee address: City: 4700 S Congress Ave Austin, TX 78745-2303	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) Food/Beverage for Fundraiser  Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

#### SCHEDULE F

EXPENDITURE CATEGORIES FOR BUX 8(a)					
	Accounting/Banking Legal Consulting Expense Food Event Expense Polli	Awards/Memorials Expense al Services d/Beverage Expense ng Expense ling Expense The Instructi	Salaries/Wages/Contract I Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex ion Guide explains how to	xpense Transportati Contribution Candidate/C OTHER (en	ment/Reimbursement on Equipment & Related Expense is/Donations Made By Officeholder/Political Committee ter a category not listed above)
1	. Total pages Schedule F:	2. FILER NAME			F # (Ethics Commission Filers)
	89	Stephen Adler		0. 7.000011	, v (Euros Goriumosion Circle)
4	Date	5 Payee name	<del></del> -		<del></del>
	08/05/2014	Home Depot			
6	Amount \$84.20	7 Payee address: 1200 Barbara Jordan Blvd	City: I Austin, TX 78723-2909	State:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category(See categories li Office Overhead/Rental Expense	isted at the top of this schedule)	Office Cleaning Prod	
9	Complete ONLY if direct	Candidate/Officeholder na	<del></del>	Office sought	, officeholder living expense Office held
_	expenditure to benefit C/OH	Candidate/Officeholder ha	arrie	Office sought	Office field
4	Date	5 Payee name			
	08/05/2014	Home Depot			
6	Amount \$47.00	7 Payee address: 1200 Barbara Jordan Blvd		State:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category (See categories li Office Overhead/Rental Expense	isted at the top of this schedule)	(b) Description (If to Office Cleaning Prod	avel outside of Texas, complete Schedule T ucts
	<u> </u>			Check if Austin, TX	, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sought	Office held
4	Date	5 Payee name			
	08/12/2014	Home Depot			•
6	Amount \$188.72	7 Payee address:	City:	State:	Zip Code
		1200 Barbara Jordan Blvd	1 Austin, TX 78723-2909		

ATTACH ADDITIONAL CODICO OF THE COLUMN ACCUMENT
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

(a) Category(See categories listed at the top of this schedule)
Office Overhead/Rental Expense

Candidate/Officeholder name

PURPOSE OF EXPENDITURE

Complete ONLY if direct expenditure to benefit C/OH

Office held

(b) Description (If travel outside of Texas, complete Schedule T)

Check if Austin, TX, officeholder living expense

Office Cleaning Products

Office sought

## **SCHEDULE F**

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense

Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

	The Instruction Guide explains how	to complete this form.
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT # (Ethics Commission Filers)
89	Stephen Adler	, ,
4 Date	5 Payee name	
09/12/2014	Home Depot	
6 Amount \$141.58	7 Payee address: City: 1200 Barbara Jordan Blvd Austin, TX 78723-2909	State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule; Office Overhead/Rental Expense	(b) Description (If fravel outside of Texas, complete Schedule T) Light Bulbs & Extension Cords  Check if Austin, TX, officeholder fiving expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
09/22/2014	Home Depot	
\$80.85	1200 Barbara Jordan Blvd Austin, TX 78723-2909	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule T) Supplies
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
07/02/2014	Intuit Payroll	
6 Amount \$6.18	7 Payee address: City: 2632 Marine Way 2632 Marine Way Mountain Vie	State: Zíp Code w , CA 94043-1126
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule Accounting/Banking	(b) Description (if travel outside of Texas, complete Schedule T Payrol) fee  Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# SCHEDULE F

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

			OTHER (ent	er a category not listed above)
	The Instruction Gu	ide explains how to	complete this form.	`
Total pages Schedule F:	2. FILER NAME		<del></del>	# (Ethics Commission Filers)
89	Stephen Adler			
4 Date	5 Payee name			
07/02/2014	Intuit Payroll			•
6 Amount	7 Payee address:	City:	State:	Zip Code
\$1.55		f		
	2632 Marine Way 2632 Marine	Way Mountain View	, CA 94043-1126	
8 PURPOSE OF	(a) Category (See categories listed at t	he top of this schedule)		avel outside of Texas, complete Schedule T)
EXPENDITURE	Accounting/Banking		Payroll fee	
				, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
4 Date	5 Payee name			
07/15/2014	Intuit Payroll			
6 Amount	7 Payee address:	City:	State:	Zip Code
\$18.55				
,	2632 Marine Way 2632 Marine	Way Mountain View	, CA 94043-11 <b>2</b> 6	
8 PURPOSE OF	(a) Category (See categories listed at t	he top of this schedule)		avel outside of Texas, complete Schedule $ ilde{T}$
EXPENDITURE	Accounting/Banking		Payroli fee	
			_ <u> </u>	, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
experiolitule to beliefit C/OH		<u> </u>	_	
4 Date	5 Payee name			
07/31/2014	Intuit Payroll			
6 Amount	7 Payee address:	City:	State:	Zip Code
\$18.55			_/ _/	
	2632 Marine Way 2632 Marine	Way Mountain View	, CA 94043-1126	
8 PURPOSE OF	(a) Category (See categories listed at	the top of this schedule)	(h) Description (If tr	avel outside of Texas, complete Schedule T
EXPENDITURE	Accounting/Banking		Payroll fee	
			1_'	, officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder name		Office sought	Office held
expenditure to benefit C/OH				

# **SCHEDULE F**

	EXPEN	IDITURE CATEGORIES	FOR BOX 8(a)	
Accounting/Banking Leg Consulting Expense Foo Event Expense Polli	Awards/Memorials Expense al Services d/Beverage Expense ng Expense ting Expense	Salaries/Wages/Contract t Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental Ex	cpense Transport Contributi Candidate cpense	payment/Reimbursement lation Equipment & Related Expense ions/Donations Made By e/Officeholder/Political Committee enter a category not listed above)
<u> </u>	The Instruction	on Guide explains how to	complete this form	n
<ol> <li>Total pages Schedule F:</li> </ol>	2. FILER NAME		3. ACCOU	NT # (Ethics Commission Filers)
89	Stephen Adler			
4 Date	5 Payee name			
08/14/2014	Intuit Payroll			
6 Amount \$17.00	7 Payee address:	City:	State:	Zip Code
	2632 Marine Way 2632 M	arine Way Mountain View,	CA 94043-1126	
8 PURPOSE OF	(a) Category(See categories lis	led at the top of this schedule)	(b) Description	f travel outside of Texas, complete Schedule T
EXPENDITURE	Accounting/Banking		Payroll fee	
			Check if Austin,	TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office sought	Office held
4 Date	5 Payee name			
08/29/2014	Intuit Payroll			
6 Amount \$18.55	7 Payee address:	City:	State:	Zip Code
	2632 Marine Way 2632 M	arine Way Mountain View,	, CA 94043-1126	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories list Accounting/Banking	ted at the top of this schedule)	(b) Description <sup>(</sup> Payroll fee	If travel outside of Texas, complete Schedule T
			Check if Austin,	TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office sought	Office held
4 Date	5 Payee name			
08/13/2014	Jalisco's Restaurant & Bar			
6 Amount \$221.30	7 Payee address:	City:	State:	Zip Code
,	6601 S Congress Ave Aust	tin, TX 78745-4461		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories lis Food/Beverage Expense	sted at the top of this schedule)		If travel outside of Texas, complete Schedule उ e for meet and greet
			Check if Austin	TX, officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder na	me	Office sought	Office held

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

expenditure to benefit C/OH

#### SCHEDULE F

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category pot listed above)

	**************************************	OTHER (enter a category not listed above)
	The Instruction Guide explains how to	o complete this form.
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT # (Ethics Commission Filers)
89	Stephen Adler	
4 Date	5 Payee name	
07/10/2014	Jewish Community Association of Austin	
6 Amount \$363.00	7 Payee address: City:	State: Zip Code
	11940 Jollyville Rd # 110 Austin, TX 78759-2327	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule Newsletter Advertising
9 Complete ONLY if direct	Candidate/Officahaldanaan	Check if Austin, TX, officeholder living expense  Office sought  Office held
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Onice sought Onice relo
4 Date	5 Payee name	
08/01/2014	Jewish Community Association of Austin	
6 Amount	7 Payee address: City;	State: Zip Code
\$363.00	11940 Jollyville Rd # 110 Austin, TX 78759-2327	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule Newsletter Advertising
_		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
09/04/2014	Jewish Community Association of Austin	
6 Amount	7 Payee address: City:	State: Zip Code
\$764.00		
·	11940 Jollyville Rd # 110 Austin, TX 78759-2327	
8 PURPOSE OF	(a) Category(See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule
EXPENDITURE	Advertising Expense	Newsletter Advertising
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# SCHEDULE F

		EXPE	NDITURE CATEGOR	IES FOR BOX 8	(a)	
Accounting/Banking Leg Consulting Expense Foo Event Expense Poll		t/Awards/Memorials Expense gal Services od/Beverage Expense lling Expense nting Expense	Salaries/Wages/Contr Solicitation/Fundraisin Travel In District Travel Out Of District Office Overhead/Rent	g Expense Tra Coi Cai al Expense OT	n Repayment/Reimbursement nsportation Equipment & Related Expen stributions/Donations Made By didate/Officeholder/Political Committee HER (enter a category not listed above)	,
_	T-1-1	•	ion Guide explains ho			
	Total pages Schedule F:	2. FILER NAME		3. AC	COUNT # (Ethics Commission File	rs)
	89	Stephen Adler				
4	Date	5 Payee name				
_	07/29/2014	Laz Parking		01-1-	7'. 0.4.	
ø	Amount \$5.00	7 Payee address:	City:	State:	Zip Code	•
		1317 Austin St Houston,	TX 77002-7105			
8	PURPOSE OF EXPENDITURE	(a) Category(See categories I Travel In District	isted at the top of this schedu	(b) Descrip	ntion (If travel outside of Texas, complete Sche	dule T
				Check if	Austin, TX, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sough	Office held	
4	Date	5 Payee name		<del></del>		
	07/01/2014	Jessica Loyola				
6	Amount \$404.28	7 Payee address: 2505B Tcri Rd Austin, T	City: X 78744-2963	State:	Zip Code	
_		_			-	
8	PURPOSE OF EXPENDITURE	(a) Category (See categories I Salaries/Wages/Contract Labor	isted at the top of this sched	(b) Descript Salary	otion (If travel outside of Texas, complete Sche	≀dule T
_				Check if	Austin, TX, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sough	d Office held	
4	Date	5 Payee name		•		
	07/15/2014	Jessica Loyola				
6	Amount \$729.15	7 Payee address:	City:	State:	Zip Code	
		2505B Teri Rd Austin, T	X 78744-2963			
8	PURPOSE OF EXPENDITURE	(a) Category (See categories Salaries/Wages/Contract Labor	listed at the top of this sched	(b) Descrip	tion (If travel outside of Texas, complete Sche	edule T

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Office sought

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

Office held

# SCHEDULE F

•	EXPE	NDITURE CATEGORIES FOR E	3OX 8(a)
•			
Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan R

Accounting/Banking
Consulting Expense
Event Expense Fees

Legal Services Food/Beverage Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

		OTHER (enter	a category not listed above)
	The Instruction Guide explains how to	complete this form.	
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT#	(Ethics Commission Filers)
89	Stephen Adler		
4 Date	5 Payee name		
07/31/2014	Jessica Loyola	•	
6 Amount \$729.15	7 Payee address: City:	State:	Zip Code
	2505B Teri Rd Austin, TX 78744-2963		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Salary	el outside of Texas, complete Schedule T
		Check if Austin, TX, of	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
08/15/2014	Jessica Loyola		
6 Amount \$729.15	7 Payee address: City:	State:	Zip Code
·	2505B Teri Rd Austin, TX 78744-2963		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If trave Salary	el outside of Texas, complete Schedule T)
		Check if Austin, TX, of	fficeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
08/29/2014	Jessica Loyola		
6 Amount \$729.15	7 Payee address: City:	State:	Zip Code
	2505B Teri Rd Austin, TX 78744-2963		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If trave	el outside of Texas, complete Schedule T)
		Check if Austin, TX, o	fficeholder living expense
Complete ONLY if direct     expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

ATTACH ADDITIONAL	COPIES OF THIS	SCHEDULE AS NEEDED
	COFIES OF ITHIS	SOURDOLL WO MEEDED

### SCHEDULE F

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense

Gift/Awards/Memorials Expense Legal Services

Food/Beverage Expense
Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

	rees Print	Ing Expense Office Overhead/Rental E	xpense OTHER (ente	er a category not listed above)
		The Instruction Guide explains how to	complete this form.	
1	. Total pages Schedule F:	2. FILER NAME	3. ACCOUNT	# (Ethics Commission Filers)
	89	Stephen Adler		
4	Date	5 Payee name		
	09/15/2014	Jessica Loyola		
6	Amount \$729.15	7 Payee address: City: 2505B Teri Rd Austin, TX 78744-2963	State:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Salary	vel outside of Texas, complete Schedule T) officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4	Date	5 Payee name		
ļ	08/31/2014	Maria's Taco Xpress		
6	Amount \$86.45	7 Payee address: • City: 2529 S Lamar Blvd Austin, TX 78704-4730	State:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Food/Beverage Expense	Meeting	vel outside of Texas, complete Schedule T
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4	Date	5 Payee name		
	07/01/2014	Patrick J McDonald		
6	Amount \$942.12	7 Payee address: City: 507 Strawberry Cv Austin, TX 78745-6425	State:	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Salary	vel outside of Texas, complete Schedule T
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# **SCHEDULE F**

EXPENDITURE (	CATEGORIES	FOR	BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By

Fees Pri	ees Printing Expense Office Overhead/Rental Ex		OTHER (enter a category not listed above)		
	The Instruction G	uide explains how to	complete this form.		
Total pages Schedule F:     89	2. FILER NAME Stephen Adler	<del></del>	3. ACCOUNT	# (Ethics Commission Filers)	
4 Date 07/15/2014	5 Payee name Patrick J McDonald				
6 Amount \$942.11	7 Payee address: 507 Strawberry Cv Austin, TX	City: 78745-6425	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed a Salaries/Wages/Contract Labor	t the top of this schedule)	(b) Description (If travel outside of Texas, com Salary  Check if Austin, TX, officeholder living expens		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name	,	Office sought	Office held	
4 Date 07/31/2014	5 Payee name Patrick J McDonald				
6 Amount \$942.11	7 Payee address: 507 Strawberry Cv Austin, TX	City: 78745-6425	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed a Salaries/Wages/Contract Labor	t the top of this schedule)	(b) Description (If travel outside of Texas, complete S Salary  Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name		Office sought	Office held	
4 Date 08/15/2014	5 Payee name Patrick J McDonald				
6 Amount \$942.11	7 Payee address: 507 Strawberry Cv Austin, TX	City: 78745-6425	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed a Salaries/Wages/Contract Labor	nt the top of this schedule)	Salary	vel outside of Texas, complete Schedule T officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/Oł	Candidate/Officeholder name		Office sought	Office held	

# SCHEDULE F

	···	EXPE	NDITURE CATEGORII	ES FOR BOX	(8(a)		
ι	Accounting/Banking Legal Consulting Expense Food Event Expense Polli	Awards/Memorials Expense al Services d/Beverage Expense ng Expense ting Expense	Salaries/Wages/Contrac Solicitation/Fundraising Travel In District Travel Out Of District Office Overhead/Rental	Expense T	ransportation Contributions Candidate/O OTHER (ente	ment/Reimbursement on Equipment & Related Expense s/Donations Made By ifficeholder/Political Committee er a category not listed above)	ł
4	Total C-blui- F		ion Guide explains how				
1.	Total pages Schedule F:	2. FILER NAME	1	3. A	ACCOUNT	# (Ethics Commission Filers)	)
_	89	Stephen Adler	<u> </u>				
4	Date	5 Payee name					
	08/29/2014	Patrick J McDonald				·	
6	Amount \$942.12	7 Payee address:	City:	State	:	Zip Code	
		507 Strawberry Cv Austin	1, TX 78745-6425				
В	PURPOSE OF EXPENDITURE	(a) Category (See calegories I Salaries/Wages/Contract Labor	isted at the top of this schedule	Salary		avel outside of Texas, complete Schedu	le T
9	Complete ONI V if disease	0 - 1 1 1 - 1 0 75 - 1 - 1 1		<del></del>		officeholder living expense	_
7	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sou	Aur	Office held	
-	·····	<u> </u>					
4	Date	5 Payee name	•	j			
	09/15/2014	Patrick J McDonald					
6	Amount \$942.11	7 Payee address:	City:	State	;	Zip Code	
		507 Strawberry Cv Austin	1, TX 78745-6425				
			^		4		
В	PURPOSE OF EXPENDITURE	(a) Category (See calegories I Salaries/Wages/Contract Labor	isted at the top of this schedule	(b) Desc Salary	ription (If tra	avel outside of Texas, complete Schedu	le T
				Check	if Austin, TX,	officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	ame	Office sou	ght	Office held	
4	Date	5 Payee name					
	07/01/2014	James McKinney		•			
6	Amount \$375,00	7 Payee address:	City:	State		Zip Code	
		6917 Langston Dr Austin					
8	PURPOSE OF EXPENDITURE	(a) Category(See categories I Consulting Expense	isted at the top of this schedule		cription <sup>(If tra</sup> nity Outreach	avel outside of Texas, complete Schedu	le T
		1		_ I ⊏	18 A 180		

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Office sought

Candidate/Officeholder name

Complete ONLY if direct expenditure to benefit C/OH

Office held

### SCHEDULE F

EXPENDITURE	CATEGORIES	FOR	BOX 8(a)

Advertising Expense. Accounting/Banking Consulting Expense
Event Expense Fees

Gift/Awards/Memorials Expense Legal Services

Food/Beverage Expense Polling Expense

Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Office Overhead/Rental Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

		OTHER (enter a	category not listed above)
	The Instruction Guide explains ho	w to complete this form.	
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT # (	Ethics Commission Filers)
89	Stephen Adler	,	,
4 Date	5 Payee name	<del></del>	•
07/15/2014	James McKinney		
6 Amount \$375.00	7 Payee address: City:	State:	Zip Code
40.0.00	6917 Langston Dr Austin, TX 78723-2219		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this scheduled Consulting Expense	Community Outreach	outside of Texas, complete Schedule T
		Check if Austin, TX, offic	<u>~ '</u>
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
07/31/2014	James McKinney		
6 Amount	7 Payee address: City:	State:	Zip Code
\$375.00	6917 Langston Dr Austin, TX 78723-2219		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedu Consulting Expense	(b) Description (If travel of Community Outreach	outside of Texas, complete Schedule T
		Check if Austin, TX, offic	eholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
08/15/2014	James McKinney		
6 Amount \$375.00	7 Payee address: City:	State:	Zip Code
	6917 Langston Dr Austin, TX 78723-2219		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedu Consulting Expense	(b) Description (If travel of Community Outreach	outside of Texas, complete Schedule T
		Check if Austin, TX, office	eholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

#### SCHEDULE F

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense

Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

	The Instruction Guide evaluing how to	complete this form	
Total pages Schedule F:	The Instruction Guide explains how to  2. FILER NAME	<del></del>	Ethics Commission Filers)
89	Stephen Adler	J. ACCOUNT#(	Ethics Commission Filers)
4 Date	5 Payee name		
09/02/2014	James McKinney		
6 Amount \$375.00	7 Payee address: City:	State:	Zip Code
	6917 Langston Dr Austin, TX 78723-2219		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel of Community Outreach	outside of Texas, complete Schedule T)
		Check if Austin, TX, affic	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
09/15/2014	James McKinney		
6 Amount \$375.00	7 Payee address: City:	State:	Zip Code
	6917 Langston Dr Austin, TX 78723-2219		
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel of Community Outreach	outside of Texas, complete Schedule T
		Check if Austin, TX, office	ceholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
07/20/2014	Michaels		•
6 Amount \$117.32	7 Payee address: City:	State:	Zip Code
	3201 Bee Caves Rd Ste 112 Austin, TX 78746-6696		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description (If travel of Supplies for Event	outside of Texas, complete Schedule T
		Check if Austin, TX, office	ceholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

### SCHEDULE F

# **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

Salaries/Wages/Contract Labor -Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

	<b>_</b>		,
4. T-4-1	The Instruction Guide explains how to	<del></del>	.E
1. Total pages Schedule F:	2. FILER NAME	3. ACCOUNT#	(Ethics Commission Filers)
89	Stephen Adler		
4 Date	5 Payee name		
09/13/2014	New World Liquor		
6 Amount	7 Payee address: City:	State:	Zip Code
\$115.50			
	343 S Congress Ave Austin, TX 78704-1218		
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense		outside of Texas, complete Schedule T)
EXPENDITURE	1 courbeverage Expense	Beverages for reception	
		<u> </u>	iceholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
07/02/2014	NGP VAN, INC		
6 Amount	7 Payee address: City:	State:	Zip Code
\$6,650.69	1101 15th St NW Stc 500 Washington, DC 20005-50		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If trave Credit Card Processing I	l outside of Texas, complete Schedule T) Pecs
		Check if Austin, TX, off	iceholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
07/03/2014	NGP VAN, INC		
6 Amount	7 Payee address: City:	State:	Zip Code
\$150.00	·		
	1101 15th St NW Ste 500 Washington, DC 20005-50	06	
8 PURPOSE OF	(a) Category(See categories listed at the top of this schedule)	(b) Description (If trave	l outside of Texas, complete Schedule T
EXPENDITURE	Feés	Credit Card Processing I	
		Check if Austin, TX, of	ficeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

### SCHEDULE F

# EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

Fees	Print	ing Expense	Office Overhead/Rental	Expense		a category not listed above)
		The Instruc	ction Guide explains how t	to complete	this form.	
Total pages Sci  89	hedule F:	2. FILER NAME Stephen Adler	<del></del>	3. /	ACCOUNT #	# (Ethics Commission Filers)
4 Date 07/03/2014		5 Payee name NGP VAN, INC				
6 Amount	\$150.00	7 Payee address: 1101 15th St NW Ste 50	City: 00 Washington, DC 20005-5	State		Zip Code
8 PURPOSE EXPENDIT		(a) Category (See categorie Fees	s listed at the top of this schedule)	Credit Ca	ard Processing	
9 Complete ONLY expenditure to be		Candidate/Officeholder	name	Office sou		office held
4 Date 07/03/2014		5 Payee name NGP VAN, INC			<u>-</u>	
6 Amount	\$150.00	7 Payee address: 1101 15th St NW Ste 50	City: 00 Washington, DC 20005-5	State		Zip Code
8 PURPOSE EXPENDIT		(a) Category (See calegorie Fees	s listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Credit Card Processing Fees		Fees
9 Complete ONLY expenditure to be		Candidate/Officeholder	name	Office sou		officeholder living expense Office held
4 Date 07/03/2014		5 Payee name NGP VAN, INC				
6 Amount	\$150.00	7 Payee address:	City: 00 Washington, DC 20005-5	State	;	Zip Code
8 PURPOSE EXPENDIT		(a) Category (See categorie Fees	is listed at the top of this schedule;	Credit C	ard Processing	el outside of Texas, complete Schedule T Fees officeholder fiving expense
9 Complete ONLY expenditure to be		Candidate/Officeholder	name	Office sou		Office held

P.O. Box 12070

# SCHEDULE F

-						
_		EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Accounting/Banking Legal Consulting Expense Food Event Expense Pollin	wards/Memorials Expense I Services /Beverage Expense ng Expense ng Expense The Instruction	Solicitation/Fundraising Expense Transportation Equip  Expense Travel In District Contributions/Donati  Travel Out Of District Candidate/Officehold  Office Overhead/Rental Expense		ment/Reimbursement on Equipment & Related Expense s/Donations Made By officeholder/Political Committee ter a category not listed above)	
1	Total pages Schedule F:	2. FILER NAME				# (Ethics Commission Filers)
•	89	Stephen Adler		آ ا	. 7.0000111	(241100 0011111101011 1 11010)
4	Date	5 Payee name				
•	07/30/2014	NGP VAN, INC				
_	Amount	7 Payee address:	City:	Sta	ate:	Zip Code
u	\$1,200.00	rayee audiess.	Ony.	0	J.C.	2.0 0000
	<b>41,200.00</b>	1101 15th St NW Ste 500	Washington, DC 20005-500	)6		
В	PURPOSE OF EXPENDITURE	(a) Category (See categories lis Solicitation/Fundraising Expense	sted at the top of this schedule)	Fundr	raising Database	
_	Complete ONLY if disease	0		Office s		, officeholder living expense Office held
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office S	ougni	Office field
4	Date	5 Payee name				
	08/04/2014	NGP VAN, INC				
6	Amount	7 Payee address:	City:	Sta	ate:	Zip Code
	\$2,855.38		Washington, DC 20005-500		,	
8	PURPOSE OF	(a) Category (See categories lis	sted at the top of this schedule)			avel outside of Texas, complete Schedule 1
	EXPENDITURE	Fces		Credi	t Card Processit	ng Fees
_			<del>,</del>			, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office s	sought	Office held
4	Date	5 Payee name				
	08/05/2014	NGP VAN, INC				
6	Amount \$1,200.00	7 Payee address:	City:	Sta	ate:	Zip Code
		1101 15th St NW Ste 500	Washington, DC 20005-500			
8	PURPOSE OF	(a) Category (See categories lis	sted at the top of this schedule)	(b) De	escription (If tr	avel outside of Texas, complete Schedule
	EXPENDITURE	Solicitation/Fundraising Expense			raising Database	
				Cr	neck if Austin, TX	, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office s	sought	Office held

ATTACH ADDITIONAL	COPIES OF THIS	SCHEDULE AS	S NEEDED

# **SCHEDULE F**

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense

Polling Expense **Printing Expense**  Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Office Overhead/Rental Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

	The Instruction	on Guide explains how to	complete this form.		
Total pages Schedule F:     89	2. FILER NAME Stephen Adler		3. ACCOUN	T#(Ethics Commission Filers)	
4 Date 07/26/2014	5 Payee name Office Max Austin				
6 Amount \$188.85	7 Payee address: 907 W 5th St Austin, TX 7	City: 8703-5426	State:	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T Office supplies  Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder na	me	Office sought	Office held	

**SCHEDULE F** 

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense

Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

	The Instruction Guide explains how to	o complete this form.		
Total pages Schedule F:	2. FILER NAME	3. ACCOUNT # (Ethics Commission Filers)		
89	Stephen Adler	(		
4 Date	5 Payee name			
09/02/2014	NGP VAN, INC	•		
6 Amount \$806.10	7 Payee address: City: 1101 15th St NW Ste 500 Washington, DC 20005-50	State: Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Credit Card Processing Fees		
0.0.1.0.0.0.0.0		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date	5 Payee name			
07/10/2014	Office Max Austin			
6 Amount \$250.04	7 Payee address: City:	State: Zip Code		
	907 W 5th St Austin, TX 78703-5426			
8 PURPOSE OF EXPENDITURE	(a) Category(See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule Office Supplies		
		Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
4 Date	5 Payee name			
07/20/2014	Office Max Austin	•		
6 Amount \$97.41	7 Payee address: City:	State: Zip Code		
•	907 W 5th St Austin, TX 78703-5426			
8 PURPOSE OF	(a) Category(See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule		
EXPENDITURE	Office Overhead/Rental Expense	Office Supplies		
9 Complete ONLY if direct	0 111 105	Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED	