SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM COVER SHEET PG 1

(512)463-5800

| | | | | | | • |
|------------------------------------------------------------------------|--------------------------------------------|----------------|---------------------------------------------------------------|-----------|------------------|--------------------------------------------------------------------------|
| The SPAC INSTRUCTION complete this form. | GUIDE explains how to | | 1 ACCOUNT # (Ethics Commission 00000006 | n filers) | 2 PAGE # | |
| 3 COMMITTEE NAME Let's Go Austin PAC | | | 1 0000000 | | | CE USE ONLY |
| | | | | | Date Received | |
| 4 COMMITTEE ADDRESS | ADDRESS / PO BOX; APT / SU | TE#; | CITY; STATE; | ZIP CODE | | |
| Change of Address | P.O. Box 301074 Austin, TX 78768 | | | | Date Hand-delive | ered or Date Postmarked |
| 5 CAMPAIGN | MS/MRS/MR | FIRST | | MI | Receipt # | Amount |
| TREASURER | Gre | | | | 22 | |
| NAME | NICKNAME | LAST | | SUFFIX | Date Processed | |
| | | tman | | | Date Imaged | A1 |
| 6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business) | 3307 Winding Creek Dr. Austin, TX 78703 | EASE); APT/SUſ | TE#: CITY: | STATE; | ZIP CODE | ISTIN CITY CLERK RECEIVED |
| 7 CAMPAIGN TREASURER'S MAILING ADDRESS Change of Address | 3307 Winding Creek Dr. Austin, TX 78703 | APT/SU | ITE#; CITY; | STATE; | ZIP CODE | LERK 4 34 |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE N | UMBER | EXTENS | SION | | |
| 9 REPORT TYPE | January 15 July 15 | X | 30th day before election 8th day before election Runoff | | 10th day | ed \$500 limit ion (attach PAC-DR) y after campaign termination |
| 10 PERIOD COVERED | Month Day | Year | | | Month | Day Year |
| į | 07/01/201 | 4 | THROUGH | | 09/2 | 25/2014 |
| 11 ELECTION | ELECTION DATE Month Day Year | ELECTION | TYPE | · | | |
| | 11/04/2014 | Prima | Runo | ff 🔯 | General | Special |
| garage such | | GO ТО | PAGE 2 | | | |

| 2 COMMITTEE Let NAME | 's Go Austin PAC | | ACCOUNT # 00000006 | (Ethics Commission filers) |
|-----------------------------------------------------------------|------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|-----------------------|----------------------------|
| 3 COMMITTEE PURPOSE | CANDIDATE | CANDIDATE / OFFICEHOLDER NAME | | |
| attach lists on plain aper to complete this port if necessary.) | OFFICEHOLDER | OFFICE SOUGHT (candidate) / OFFICE HELD (officeholde | er) | |
| SUPPORT (Candidate or Measure) OPPOSE (Candidate or Measure) | | BALLOT IDENTIFICATION / # ELECTIC Month Day 1 11/04/20 | / Year | . <u> </u> |
| ASSIST (Officeholder anly) | X MEASURE | DESCRIPTION Support transportation bond for City of Austin | ν | |
| CONTRIBUTION TOTALS | | POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN | | |
| TOTALS | PLEUGE | S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ | 375.00 |
| | | POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 485,876.01 |
| EXPENDITURE TOTALS | 3. TOTAL P | POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ | 386.08 |
| | 4. TOTAL POLITICAL EXPENDITURES | | \$ | 227,276.62 |
| CONTRIBUTION BALANCE | | POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY REPORTING PERIOD | \$ | 290,724.83 |
| OUTSTANDING LOAN TOTALS | | RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LY OF THE REPORTING PERIOD | \$ | 0.00 |
| III XX II MYCC | JUDITH LEWIS MMISSION EXPIRES Iclober 28, 2015 | I swear, or affirm, under penalty of is true and correct and includes all me under Title 15, Election Code. Signature of Carr | | ired to be reported by |

, to certify which, witness my hand and seal of office.

Sworn to and subscribed before me, by the said of the best 20 14 , to certify which

| | The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE# | 2 D 4 0/00 |
|---|-----------------|-------------------------------------------------------------------------------------------------|---------------------|-------------------------------|----------------------------------------------------|
| 2 | FILER NAME | Let's Go Austin PAC | | 3 ACCOUNT # 00000006 | 9 Report: 3/26 (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ut-of-state PAC (ID# Aguirre & Fields LP | *) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 09/10/2014 | 6 Contributor address; City; State; Zip Code 12999 Jess Pirtle Blvd. Sugar Land, TX 77478 | | \$250.00 | - |
| | ļ | | | (If travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup | ation / Job title (See Instructions) | 10 Employer (See In | structions) | |
| | Date | Full name of contributor Out-of-state PAC (ID# Aguirre & Fields LP PAC | ‡) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 08/18/2014 | Contributor address; City; State; Zip Code 12999 Jess Pirtle Blvd. Sugar Land, TX 77478 | | \$250.00 | |
| | | Sugai Land, 17.77476 | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | pation / Job title (See Instructions) | Employer (See In | structions) | · · · · · · · · · · · · · · · · · · · |
| | | | | | |
| | Date | Full name of contributor | | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 08/18/2014 | Contributor address; City; State; Zip Code 5904 Mountainclimb Dr. Apt. 1 Austin, TX 78731 | | \$250.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | eation / Job title (See Instructions) | Employer (See In | 1 | |
| | | | | | |
| | Date | Full name of contributor □ out-of-state PAC (ID# Big Red Dog - Austin, LLC | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 08/15/2014 | Contributor address; City; State; Zip Code 815-A Brazos St. | | \$250.00 | |
| | | #319 Austin, TX 78701 | | | |
| | <u> </u> | | | l ' | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | |
| | Date | Full name of contributor | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 08/18/2014 | Contributor address; City; State; Zip Code 2000 Homedale Dr. Austin, TX 78704 | | \$250.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In: | · | |
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|-------------------|-------------------------------------------------------------------------------------------------------------------|---------------------|-------------------------------|-----------------------------------------------------------------------------|
| The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 2/9 | 9 Report: 4/26 |
| 2 FILER NAME | Let's Go Austin PAC | | 3 ACCOUNT# 00000006 | (Ethics Commission filers) |
| 4 Date | 5 Full name of contributor ut-of-state PAC (ID: Central Texas Chapter of the American Council of Compani | | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) food and beverages for |
| 09/10/2014 | 6 Contributor address; City; State; Zip Code 1851 S. Lakeshore Blvd. Ste. 104, #162 Cedar Park, TX 78613 | | \$1,072.13 | event |
| | | | (If travel outside of | Texas, complete Schedule T) |
| 9 Principal occup | oation / Job title (See Instructions) | 10 Employer (See In | structions) | |
| Date | Full name of contributor | *) | Amount of contribution (\$) | In-kind contribution description (if applicable) food & beverages for |
| 09/04/2014 | Contributor address; City; State; Zip Code 100 Congress Avenue Suite 1100 Austin. TX 78701 | | \$587.66 | event |
| | 7,000, | | (If travel outside of | Texas, complete Schedule T) |
| Principal occup | pation / Job title (See Instructions) | Employer (See In | <u> </u> | |
| | | | | |
| Date | Full name of contributor | *) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 07/16/2014 | Contributor address; City; State; Zip Code 4810 Placid Pl. Austin, TX 78731 | | \$250.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | |
| Date | Full name of contributor | ¥) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 08/18/2014 | Contributor address; City; State; Zip Code PO Box 603 Kyle, TX 78640 | | \$250.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | |
| Date | Full name of contributor | #) | Amount of contribution (\$) | In-kind contribution description (if applicable) food & beverage for |
| 08/18/2014 | Contributor address; City; State; Zip Code PO Box 603 Kyle, TX 78640 | | \$491.22 | l event I |
| | | | (If travel outside of | Texas, complete Schedule T) |
| Principal occup | ation / Job title (See Instructions) | Employer (See In | l ' | , |
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|-------------------|-----------------------------------------------------------------------------------------|---------------------|-------------------------------|----------------------------------------------------|
| The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 3/9 | 9 Report: 5/26 |
| 2 FILER NAME | Let's Go Austin PAC | | 3 ACCOUNT# 00000006 | (Ethics Commission filers) |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID Forrest, Hugh | #) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 09/02/2014 | 6 Contributor address; City; State; Zip Code 703-B East 50th St. Austin, TX 78751 | | \$1,000.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| 9 Principal occup | ation / Job title (See Instructions) | 10 Employer (See In | structions) | |
| Date | Full name of contributor | #) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 08/18/2014 | Contributor address; City; State; Zip Code 4603 Depew Ave. Austin, TX 78751 | | \$250.00 | |
| | · | | | · |
| | | T = | 1 ' | Texas, complete Schedule T) |
| Principal occur | ation / Job title (See Instructions) | Employer (See In | structions) | |
| Date | Full name of contributor | #) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 09/10/2014 | Contributor address; City; State; Zip Code 6603 Cat Creek Trail Austin, TX 78731 | | \$500.00 | |
| | | | | Texas, complete Schedule T) |
| Principal occur | ation / Job title (See Instructions) | Employer (See In | structions) | |
| Date | Full name of contributor | #) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 08/18/2014 | Contributor address; City; State; Zip Code 107 S. Main Kyle, TX 78640 | | \$250.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | |
| Date | Full name of contributor | #) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 07/30/2014 | Contributor address; City; State; Zip Code 4409 Avenue A Suite 102 | | \$100.00 | |
| | Austin, TX 78751 | | | ' <u> </u> |
| | | | (If travel outside of | Texas, complete Schedule T) |
| Principal occup | ation / Job title (See Instructions) | Emplayer (See In | structions) | |

| The Instructi | ON GUIDE explains how to complete this form. | | 1 PAGE# | 9 Report: 6/26 |
|------------------|--------------------------------------------------------------------------------------------|---------------------|-------------------------------|----------------------------------------------------|
| 2 FILER NAME | Let's Go Austin PAC | | 3 ACCOUNT # 00000006 | (Ethics Commission filers) |
| 4 Date | 5 Full name of contributor ut-of-state PAC (ID: Glenn, Donald | #) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 09/10/2014 | 6 Contributor address; City; State; Zip Code 1713 Glen Falls Lane Pearland, TX 77581 | | \$250.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| 9 Principal occu | pation / Job title (See Instructions) | 10 Employer (See In | estructions) | |
| Date | Full name of contributor | #) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 08/20/2014 | Contributor address; City; State; Zip Code 9309 Leaning Rock Circle Austin, TX 78730 | | \$5,000.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| Principal occup | pation / Job title (See Instructions) | Employer (See In | 1 | Texas, complete concedure 1) |
| · | , | | ·-····, | |
| Date | Full name of contributor | ¥) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 09/25/2014 | Contributor address; City; State; Zip Code PO Box 98 Austin, TX 78767 | | \$1,000.00 | - - |
| | | | (If travel outside of | Texas, complete Schedule T} |
| Principal occu | pation / Job title (See Instructions) | Employer (See In | | |
| Date | Full name of contributor | ¥) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 08/18/2014 | Contributor address; City; State; Zip Code 16900 Crystal Caves Rd. Austin, TX 78737 | | \$250.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| Principal occup | pation / Job title (See Instructions) | Employer (See In | structions) | |
| Date | Full name of contributor | ‡) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 09/19/2014 | Contributor address; City; State; Zip Code 5400 Cedro Trail Austin, TX 78731 | | \$2,500.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| Principal occur | Leation / Job title (See Instructions) | Employer (See In | · · | |
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| The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 5/9 | 9 Report: 7/26 |
| 2 FILER NAME | Let's Go Austin PAC | | 3 ACCOUNT # 00000006 | (Ethics Commission filers) |
| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID♯ Jackson, Keith | :) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 09/10/2014 | 6 Contributor address; City; State; Zip Code 504 E. 42nd St. Austin, TX 78751 | | \$250.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| 9 Principal occur | ation / Job title (See Instructions) | 10 Employer (See In | structions) | |
| Date | Full name of contributor □ out-of-state PAC (ID# Jackson Walker, L.L.P. |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 09/04/2014 | Contributor address; City; State; Zip Code 901 Main Street Suite 6000 Dallas, TX 75202 | | \$2,500.00 | 1 |
| | | | (If travel outside of | Texas, complete Schedule T) |
| Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | 2111 |
| Date | Full name of contributor out-of-state PAC (ID# Jenkins, Bobby |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 08/21/2014 | Contributor address; City; State; Zip Code 1404 Ethridge Austin, TX 78703 | | \$2,500.00 | |
| | | | (if travel outside of | Texas, complete Schedule T) |
| Principal occur | ration / Job title (See Instructions) | Employer (See In | * | |
| - Interpar occup | | · · · · · · · · · · · · · · · · · · · | T. C. | |
| Date | Full name of contributor □ out-of-state PAC (ID# K&L Gates LLP | :) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 09/20/2014 | Contributor address; City; State; Zip Code 210 Sixth Ave. Pittsburgh, PA 15222 | | \$5,000.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| Principal occup | ation / Job title (See Instructions) | Employer (See In: | structions) | |
| Date | Full name of contributor | :) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 07/10/2014 | Contributor address; City; State; Zip Code 2925 Briarpark Dr. Fourth Floor | | \$5,000.00 | |
| | Houston, TX 77042 | • | (84 | · |
| Deleginal agent | otion / Joh title (Con Instructions) | Employer (Cara) | | Texas, complete Schedule T) |
| Principal occup | eation / Job title (See Instructions) | Employer (See In: | structions) | |

| | The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE# | 9 Report: 8/26 |
|----------|------------------|----------------------------------------------------------------------------------------|---------------------|-------------------------------|--------------------------------------------------|
| 2 | FILER NAME | Let's Go Austin PAC | , | 3 ACCOUNT# 00000006 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ut-of-state PAC (ID: Little, Lewis, Jr. | #) | 7 Amount of contribution (\$) | 8 |
| , | 09/03/2014 | 6 Contributor address; City; State; Zip Code 2806 Stratford Dr. Austin, TX 78746 | | \$2,500.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup | ation / Job title (See Instructions) | 10 Employer (See In | structions) | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 08/13/2014 | Contributor address; City; State; Zip Code 1311-A East 6th St. Austin, TX 78702 | | \$15,000.00 |] |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| \vdash | Principal occup | eation / Job title (See Instructions) | Employer (See In | <u>L.'</u> | |
| | | | | , | |
| | Date | Full name of contributor | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 08/18/2014 | Contributor address; City; State; Zip Code 10017 Wild Dunes Dr. Austin, TX 78747 | | \$250.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | |
| | Date | Full name of contributor | #) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 07/26/2014 | Contributor address; City; State; Zip Code P.O. Box 4721 | | \$100.00 | |
| | | Austin, TX 78765 | | | |
| <u> </u> | Principal occur | ation / Job title (See Instructions) | Employer (See In | | Texas, complete Schedule T) |
| | i ilicipai occup | adon / 300 tille (Gee matrochons) | Employer (See in | su detions) | |
| | Date | Full name of contributor | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 08/18/2014 | Contributor address; City; State; Zip Code 2103 Wilson St. Austin, TX 78704 | | \$250.00 | |
| | | | | | · · |
| _ | Principal occurs | ation / Job title (See Instructions) | Employer (See In | , | Texas, complete Schedule T) |
| | i imolpai occup | anon von une (oee mandenons) | Employer (3ee iii | acidolio) | |

| | The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 7/9 | 9 Report: 9/26 |
|---|-----------------|--------------------------------------------------------------------------------------------|---------------------|-------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2 | FILER NAME | Let's Go Austin PAC | - | 3 ACCOUNT# 00000006 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID# Michel, Travis | !) | 7 Amount of contribution (\$) | 8 |
| | 08/18/2014 | 6 Contributor address; City; State; Zip Code 4228 Berkman Austin, TX 78723 | | \$100.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup | ation / Job title (See Instructions) | 10 Employer (See In | structions) | |
| | Date | Full name of contributor | !) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 09/02/2014 | Contributor address; City; State; Zip Code 2000 NW Loop 410 San Antonio, TX 78213 | | \$1,000.00 | |
| | | | | (15 4 | T |
| H | Principal occup | ation / Job title (See Instructions) | Employer (See In | 1 ` | Texas, complete Schedule T) |
| | | | | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 09/02/2014 | Contributor address; City; State; Zip Code 7900 Escala Dr. Austin, TX 78735 | | \$1,500.00 | |
| | | | | /If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In | , | Total (and total control of the cont |
| _ | <u></u> | | | I | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 08/18/2014 | Contributor address; City; State; Zip Code 317 Ridgewood Rd. Austin, TX 78746 | | \$250.00 | |
| | | | | /lf travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In | 1 | Texas, complete scribdule 17 |
| | Date | Full name of contributor | · · · | Amount of | In-kind contribution |
| | Dute | Ray, Beth Ann | ····· | contribution (\$) | description (if applicable) |
| | 09/24/2014 | Contributor address; City; State; Zip Code 11708 Running Brush Cove Austin, TX 78717 | | \$500.00 | 1 |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | |
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| | The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 8/9 | Report: 10/26 |
|---|-----------------|------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------|-----------------------------------------------------|
| 2 | FILER NAME | Let's Go Austin PAC | | 3 ACCOUNT# 00000006 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID#RECA-Business M/PAC | <u> </u> | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 09/20/2014 | 6 Contributor address; City; State; Zip Code 98 San Jacinto Blvd. Ste. 510 Austin, TX 78701 | | \$25,000.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup | ation / Job title (See Instructions) | 10 Employer (See In | structions) | |
| | Date | Full name of contributor | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 07/15/2014 | Contributor address; City; State; Zip Code 13809 Research Blvd. Ste. 300 | | \$500.00 | |
| | | Austin, TX 78750 | | | _ |
| | | | | <u> </u> | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | |
| | Date | Full name of contributor | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 09/10/2014 | Contributor address; City; State; Zip Code 2905 Brian Wood Ct. Cedar Park, TX 78613 | | \$500.00 | |
| | | * | | | · |
| | Principal occur | ation / Job title (See Instructions) | Employer (See In | <u> </u> | Texas, complete Schedule T) |
| | Timospar occup | and 7 300 title (366 manucions) | | sii delloris) | |
| | Date | Full name of contributor | <u>; </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 08/18/2014 | Contributor address; City; State; Zip Code 4111 Tablerock Dr. Austin, TX 78731 | | \$250.00 | |
| | | | | /// | · * |
| | Principal occur | ation / Job title (See Instructions) | Employer (See In | 1 ' | Texas, complete Schedule T) |
| | · maipai occup | and it is the coordinate and is | Linployer (occ iii | | |
| | Date | Full name of contributor | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 08/18/2014 | Contributor address; City; State; Zip Code 4925 Celanova Ct. Austin, TX 78738 | | \$100.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In | | |
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| | The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 9/9 | 9 Report: 11/26 | |
| 2 | FILER NAME | Let's Go Austin PAC | | 3 ACCOUNT# 00000006 | (Ethics Commission filers) | |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID# Smith Turrieta PLLC | <u> </u> | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) | |
| | 09/10/2014 | 6 Contributor address; City; State; Zip Code PO Box 5902 Austin, TX 78763 | | \$200.00 | | |
| _ | | | | (If travel outside of | Texas, complete Schedule T) | |
| 9 | Principal occup | pation / Job title (See Instructions) | 10 Employer (See In | structions) | | |
| | Date | Full name of contributor | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 08/18/2014 | Contributor address; City; State; Zip Code 4111 Tablerock Dr. Austin, TX 78731 | | \$100.00 | | |
| | l | | | as 41teide of | T | |
| _ | Principal occur | pation / Job title (See Instructions) | Employer (See In | 1 | Texas, complete Schedule T) | |
| | | | | | | |
| | Date | Full name of contributor | <u>; </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 08/04/2014 | Contributor address; City; State; Zip Code 111 Congress Ave. Suite G-190 Austin, TX 78701 | | \$10,000.00 | ! ! | |
| <u> </u> | Principal occur | pation / Job title (See Instructions) | Employer (See In | ' | Texas, complete Schedule T) | |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In: | structions) | | |
| | Date | Full name of contributor out-of-state PAC (ID# Winstead, P.C. | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 09/04/2014 | Contributor address; City; State; Zip Code 500 Winstead Building 2728 N. Harwood St. Dallas, TX 75201 | | \$10,000.00 | | |
| | | Dallas, 17 73201 | | (if travel outside of | Texas, complete Schedule T) | |
| | Principal occup | Dation / Job title (See Instructions) | Employer (See In: | <u> </u> | Tonia, avrilpata arrivation / | |
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|---|-----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|----------------------------------------------------|
| | The Instruction Guide explains how to complete this form. | | 1 PAGE # Schedule: 1/ | 6 Report: 12/26 |
| 2 | COMMITTEE NAME | Let's Go Austin PAC | 3 ACCOUNT# 00000006 | (Ethics Commission filers) |
| 4 | Date | Corporation / Labor Organization name Austin DMO, Inc. | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 08/21/2014 | 6 Corporation / Labor Organization address; City; State; Zip Code 211 E. 7th St. Ste. 818 Austin, TX 78701 | \$253,000.00 | |
| L | | | (if travel outside of | Texas, complete Schedule T) |
| | Date | Corporation / Labor Organization name Bazaarvoice, Inc. | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 09/03/2014 | Corporation / Labor Organization address; City; State; Zip Code 4507 Knapp Hollow Austin, TX 78731 | \$5,000.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| | Date | Corporation / Labor Organization name Bridgefarmer & Associates, Inc. | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 09/10/2014 | Corporation / Labor Organization address; City; State; Zip Code 15901 Central Commerce Drive Ste 505 Pflugerville, TX 78660 | \$250.00 | |
| | | | (if travel outside of | Texas, complete Schedule T) |
| | Date | Corporation / Labor Organization name Brown & Gay Engineers, Inc. | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 09/25/2014 | Corporation / Labor Organization address; City; State; Zip Code 10777 Westheimer Rd. Ste. 400 Houston, TX 77042 | \$500.00 | |
| | : | | (If travel outside of | Texas, complete Schedule T) |
| | Date | Corporation / Labor Organization name Bury-AUS, Inc. | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 09/05/2014 | Corporation / Labor Organization address; City; State; Zip Code 221 West 6th St. Ste. 600 Austin, TX 78701 | \$1,000.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| | Date | Corporation / Labor Organization name Cobb Fendley | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 09/10/2014 | Corporation / Labor Organization address; City; State; Zip Code 13430 Northwest Freeway Suite 1100 Houston, TX 77040 | \$500.00 | |
| L | | | (If travel outside of | Texas, complete Schedule T) |
| | | | | Electronic Filing Version 3.4.6 |

CORPORATE OR LABOR ORGANIZATION

CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

| L. | | | | |
|----|-------------------|----------------------------------------------------------------------------------------------------------------------------------|-------------------------------|----------------------------------------------------|
| | The INSTRUCTIO | N GUIDE explains how to complete this form. | 1 PAGE# Schedule: 2/ | 6 Report: 13/26 |
| 2 | COMMITTEE NAME | Let's Go Austin PAC | 3 ACCOUNT# 00000006 | (Ethics Commission filers) |
| 4 | Date | Corporation / Labor Organization name CP&Y, Inc. | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 09/10/2014 | 6 Corporation / Labor Organization address; City; State; Zip Code 1820 Regal Row Suite 200 Dallas, TX 75235 | \$250.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| | Date | Corporation / Labor Organization name Elizabeth Christian & Associates Public Relations, Inc. | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 09/04/2014 | Corporation / Labor Organization address; City: State; Zip Code 823 Congress Ave. Ste. 1505 Austin, TX 78701 | \$500.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| | Date | Corporation / Labor Organization name Encotech | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 08/18/2014 | Corporation / Labor Organization address; City; State; Zip Code 8500 Bluffstone Cove Suite B-103 Austin, TX 78759 | \$250.00 | |
| | | | (If trave) outside of | Texas, complete Schedule T) |
| _ | Date | Corporation / Labor Organization name Forestar | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 08/27/2014 | Corporation / Labor Organization address; City; State; Zip Code 6300 Bee Cave Rd., Bldg. Two Ste. 500 Austin, TX 78746 | \$10,000.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| | Date | Corporation / Labor Organization name Freese and Nichols, Inc. | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 09/10/2014 | Corporation / Labor Organization address; City; State; Zip Code 4055 International Plaza Suite 200 Fort Worth, TX 76109 | \$250.00 | |
| L | | | (If travel outside of | Texas, complete Schedule T) |
| | Date | Corporation / Labor Organization name Gateway Planning Group, Inc. | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 09/15/2014 | Corporation / Labor Organization address; City; State; Zip Code 3100 McKinnon St. 7th Floor Dallas, TX 75201 | \$1,000.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |

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|---------------------|------------------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------------|
| The Instruct | ION GUIDE explains how to complete this form. | 1 PAGE # Schedule: 3/ | 6 Report: 14/26 |
| 2 COMMITTEE NAME | Let's Go Austin PAC | 3 ACCOUNT# 00000006 | (Ethics Commission filers) |
| 4 Date | 5 Corporation / Labor Organization name Gemalto, Inc. | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 09/20/2014 | 6 Corporation / Labor Organization address; City; State; Zip Code 101 Park Drive Montgomery, PA 18936 | \$100.00 | |
| | | (If travel outside of | Texas, complete Schedule T) |
| Date | Corporation / Labor Organization name Greater Austin Economic Development Corp. | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 08/27/2014 | Corporation / Labor Organization address; City; State; Zip Code 535 East 5th St. Austin, TX 78701 | \$75,000.00 | |
| | | (If travel outside of | Texas, complete Schedule T) |
| Date | Corporation / Labor Organization name Halff Associates, Inc. | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 09/05/2014 | Corporation / Labor Organization address; City; State; Zip Code 1201 North Bowser Rd. Richardson, TX 75081 | \$250.00 | |
| | | (If travel outside of | Texas, complete Schedule T) |
| Date | Corporation / Labor Organization name HDR Engineering, Inc. | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 09/25/2014 | Corporation / Labor Organization address; City; State; Zip Code 9404 Indian Hills Dr. Omaha, NE 68114 | \$5,000.00 | |
| | | (If travel outside of | Texas, complete Schedule T) |
| Date | Corporation / Labor Organization name Higginbotham Insurance | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 09/25/2014 | Corporation / Labor Organization address; City; State; Zip Code 500 W. 13th St. Fort Worth, TX 76102-4657 | \$1,000.00 | [|
| | | (If travel outside of | Texas, complete Schedule T) |
| Date | Corporation / Labor Organization name Holt Cat | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 08/29/2014 | Corporation / Labor Organization address; City; State; Zip Code 3302 S. WW White Rd. San Antonio, TX 78222 | \$5,000.00 | |
| | | (If travel outside of | Texas, complete Schedule T) |

| The Instruction | ON GUIDE explains how to complete this form. | 1 PAGE# | |
|---------------------|--------------------------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------------|
| | | | 6 Report: 15/26 |
| 2 COMMITTEE NAME | Let's Go Austin PAC | 3 ACCOUNT# 00000006 | (Ethics Commission filers) |
| 4 Date | Corporation / Labor Organization name Huitt-Zollars | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 09/10/2014 | 6 Corporation / Labor Organization address; City; State; Zip Code 1717 McKinney Ave. Ste. 1400 Dallas, TX 75202 | \$250.00 | |
| | | (If travel outside of | Texas, complete Schedule T) |
| Date | Corporation / Labor Organization name Jose I. Guerra, Inc. | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 09/10/2014 | Corporation / Labor Organization address; City; State; Zip Code 2401 S. IH-35 Austin, TX 78741 | \$250.00 | []] ! |
| | | (If travel outside of | Texas, complete Schedule T) |
| Date | Corporation / Labor Organization name JQ+TSEN, LLC | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 08/18/2014 | Corporation / Labor Organization address; City; State; Zip Code 1608 West 6th St. Ste. 200 Austin, TX 78703 | \$250.00 | |
| | , iddini, 177 or oc | (If travel outside of | Texas, complete Schedule T) |
| Date | Corporation / Labor Organization name Kennedy Consulting, Inc. | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 07/16/2014 | Corporation / Labor Organization address; City; State; Zip Code 205 E. University Ave. Ste. 450 Georgetown, TX 78626 | \$1,000.00 | |
| | 5001g0.0001, 17.70020 | (If travel outside of | Texas, complete Schedule T) |
| Date | Corporation / Labor Organization name Kimley-Horn & Associates | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 09/25/2014 | Corporation / Labor Organization address; City; State; Zip Code PO Box 33068 Raleigh, NC 27636-3068 | \$300.00 |] |
| | | (If travel outside of | Texas, complete Schedule T) |
| Date | Corporation / Labor Organization name Klotz Associates, Inc. | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 09/10/2014 | Corporation / Labor Organization address; City, State; Zip Code 901 S. Mopac Expwy. Ste. 5-220 | \$500.00 | [[[|
| | Austin, TX 78746 | (If travel outside of | Texas, complete Schedule T) |

| The Instruction | ON GUIDE explains how to complete this form. | 1 PAGE# Schedule: 5/ | 6 Report: 16/26 |
|---------------------|--------------------------------------------------------------------------------------------------------------------------|-------------------------------|----------------------------------------------------|
| 2 COMMITTEE NAME | Let's Go Austin PAC | 3 ACCOUNT# 00000006 | (Ethics Commission filers) |
| 4 Date | Corporation / Labor Organization name LNV, Inc. | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 09/10/2014 | 6 Corporation / Labor Organization address; City; State; Zip Code 801 Navigation Blvd. Ste. 300 Corpus Christi, TX 78408 | \$1,000.00 | |
| | | (If travel outside of | Texas, complete Schedule T) |
| Date | Corporation / Labor Organization name Othon, Inc. | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 09/10/2014 | Corporation / Labor Organization address; City; State; Zip Code 11111 Wilcrest Glen Ste. 128 Houston, TX 77042 | \$500.00 |] |
| | ` | (If travel outside of | Texas, complete Schedule T) |
| Date | Corporation / Labor Organization name | Amount of | In-kind contribution |
| | Parsons Brinckerhoff, Inc. | contribution (\$) | description (if applicable) |
| 09/10/2014 | Corporation / Labor Organization address; City; State; Zip Code | \$1,000.00 | |
| | One Penn Plaza New York, NY 10119 | | ! |
| | | (If travel outside of | Texas, complete Schedule T) |
| Date | Corporation / Labor Organization name Pierce, Goodwin, Alexander & Linville, Inc. | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 08/18/2014 | Corporation / Labor Organization address; City; State; Zip Code 3131 Briarpark Dr. Ste. 200 Houston, TX 77042 | \$250.00 | |
| | Todaton, TXTYOTE | (If travel outside of | I Texas, complete Schedule T) |
| Date | Corporation / Labor Organization name Raba Kistner | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 08/13/2014 | Corporation / Labor Organization address; City; State; Zip Code 12821 West Golden Lane San Antonio, TX 78249 | \$1,500.00 | |
| | | (If travel outside of | Texas, complete Schedule T) |
| | | | |
| Date | Corporation / Labor Organization name Stewart Title | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 09/05/2014 | Corporation / Labor Organization address; City; State; Zip Code 1980 Post Oak Blvd. Ste. 1000 Houston, TX 77056 | \$1,000.00 | |
| | | (If travel outside of | Texas, complete Schedule T) |
| | · · · · · · · · · · · · · · · · · · · | | |

| Date 5 Corporation / Labor Organization name Surveying and Mapping, LLC 6 Corporation / Labor Organization address; City; 4801 Southwest Parkway Parkway Two, Suite 100 Austin, TX 78735 Date Corporation / Labor Organization name Terracon O9/10/2014 Corporation / Labor Organization name Terracon Corporation / Labor Organization address; City; 18001 W. 106th St. | 3 ACCOUNT # (Ethics Commission filers) 00000006 7 Amount of contribution (\$) 8 In-kind contribution description (if applicable \$250.00 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| Surveying and Mapping, LLC 09/10/2014 6 Corporation / Labor Organization address; City; 4801 Southwest Parkway Parkway Two, Suite 100 Austin, TX 78735 Date Corporation / Labor Organization name Terracon 09/10/2014 Corporation / Labor Organization address; City; 18001 W. 106th St. | contribution (\$) description (if applicable \$250.00 (If travel outside of Texas, complete Schedule T) |
| 4801 Southwest Parkway Parkway Two, Suite 100 Austin, TX 78735 Date Corporation / Labor Organization name Terracon 09/10/2014 Corporation / Labor Organization address; City; 18001 W. 106th St. | (If travel outside of Texas, complete Schedule T) Amount of In-kind contribution |
| Terracon 09/10/2014 Corporation / Labor Organization address; City; 18001 W. 106th St. | Amount of In-kind contribution |
| Terracon 09/10/2014 Corporation / Labor Organization address; City; 18001 W. 106th St. | Amount of In-kind contribution contribution (\$) description (if applicable |
| 18001 W. 106th St. | I 1 |
| Ste. 300 Olathe, KS 66061 | State; Zip Code \$250.00 |
| | (If travel outside of Texas, complete Schedule T) |
| Date Corporation / Labor Organization name Upland Software, Inc. | Amount of In-kind contribution contribution (\$) description (if applicable |
| 09/05/2014 Corporation / Labor Organization address; City; 401 Congress, Ste. 1850 Austin, TX 78701 | State; Zip Code \$10,000.00 |
| | (If travel outside of Texas, complete Schedule T) |
| Date Corporation / Labor Organization name White Lodging Services Corp. | Amount of In-kind contribution contribution (\$) description (if applicable |
| O9/14/2014 Corporation / Labor Organization address; City; 701 E. 83rd Ave. Merrillville, IN 46410 | State; Zip Code \$10,000.00 |
| | (If travel outside of Texas, complete Schedule T) |

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

direct expenditure to benefit C/OH

Gifts/Awards/Memorial 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)

Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 1 PAGE# 3 ACCOUNT # (TEC filers) Let's Go Austin PAC Schedule: 1/9 Report: 18/26 00000006 4 Date 5 Payee name 08/18/2014 Amazon.com Amount (\$) Payee address City; State; Zip Code 1200 12th Ave. South, Ste. 1200. \$217.99 Seattle, WA 98144 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Office Overhead/Rental Expense office supplies OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 09/15/2014 Austin Chronicle Amount (\$) Payee address City: State: Zip Code PO Box 49066 \$1,345.00 Austin, TX 78765 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Political print advertising OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Austin Chronicle 09/17/2014 Amount (\$) Payee address City: State: Zip Code PO Box 49066 \$1,345.00 Austin, TX 78765 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Advertising Expense Political print advertising OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 09/23/2014 Austin Chronicle Amount (\$) Pavee address City; State; Zip Code PO Box 49066 \$1,545.00 Austin, TX 78765 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Advertising Expense Political print advertising **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held:

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

1805 Miles Ave. Austin, TX 78745

Consulting Expense

Candidate / Officeholder name

Category (See Categories listed at the top of this schedule)

\$3,000.00

PURPOSE

OF EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial 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 OTHER (enter a category not listed above)

Loan Repayment/Reimbursement

The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Let's Go Austin PAC Schedule: 2/9 Report: 19/26 00000006 4 Date 5 Payee name **Austin Strategies** 08/01/2014 Amount (\$) Payee address City; State; Zip Code 2205 Rabb Glen St. \$3,000.00 Austin, TX 78704 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Communications consulting OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 08/01/2014 Austin Strategies Amount (\$) Payee address City: State: Zip Code 2205 Rabb Glen St. \$3,500.00 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Website design OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 09/08/2014 **Austin Strategies** Payee address Amount (\$) City; State; Zip Code 2205 Rabb Glen St. \$3,000.00 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Communications consulting OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 08/29/2014 Cantu, Fred Amount (\$) Payee address City; State; Zip Code

(if travel outside of Texas, complete Schedule T)

Office held:

Description

Field services consulting

Office sought:

Check if Austin, TX, officeholder living expense

Complete ONLY if

direct expenditure to benefit C/OH

Candidate / Officeholder name

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Legal Services Travel In District Travel Out Of District Food/Beverage Expense Polling Expense Printing Expense Event Expense Candidate/Officeholder/Political Committee Office Overhead/Rental Expense OTHER (enter a category not listed above) The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Let's Go Austin PAC Schedule: 3/9 Report: 20/26 0000006 4 Date 5 Payee name Chincanchan, David 09/15/2014 Payee address Amount (\$) City; State; Zip Code 2817 Salado St \$1,500.00 Austin, TX 78705 (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) 8 (b) Description **PURPOSE** Salaries/Wages/Contract Labor Salary OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 08/29/2014 Dandy Idea Payee address Amount (\$) City; State; Zip Code P.O. Box 3688 \$1,750.00 Austin, TX 78764 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense graphic design OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 08/15/2014 Facebook, Inc. Amount (\$) Payee address City: State: Zip Code 1601 Willow Road \$2,000.00 Menlo Park, CA 94025 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Political online advertising OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 09/18/2014 Facebook, Inc. Amount (\$) Pavee address City; State; Zip Code 1601 Willow Road \$1,000.00 Menlo Park, CA 94025 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Political online advertising **EXPENDITURE** Check if Austin, TX, officeholder living expense

Office held:

Office sought:

PURPOSE

EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Gifts/Awards/Memorial Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Solicitation/Fundralsing Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Consulting Expense Travel In District Travel Out Of District Event Expense Fees Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 3 ACCOUNT # (TEC filers) 2 FILER NAME Let's Go Austin PAC Schedule: 4/9 Report: 21/26 0000006 4 Date 5 Payee name 08/25/2014 Goss, Delwin Payee address 6 Amount (\$) City; State; Zip Code 6410 Ponca St. \$4,090.00 Austin, TX 78741 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Salaries/Wages/Contract Labor Contract labor **OF EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 09/23/2014 Goss, Delwin Amount (\$) Payee address City; State; Zip Code 6410 Ponca St \$585.00 Austin, TX 78741 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Salaries/Wages/Contract Labor contract labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 09/15/2014 Greenberg Quinlan Rosner Research Amount (\$) Pavee address City; State; Zip Code 10 G Street NE, Suite 500 \$30,200.00 Washington, DC 20002 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Polling Expense Polling OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 07/01/2014 Harry, Susan Amount (\$) Payee address City: State; Zip Code P.O. Box 301074 \$4,500.00 Austin, TX 78703

Category (See Categories listed at the top of this schedule)

Consulting Expense

Candidate / Officeholder name

(If travel outside of Texas, complete Schedule T)

Office held:

Fundraising & compliance consulting

Office sought:

Check if Austin, TX, officeholder living expense

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense

Gifts/Awards/Memorial Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor

Loan Repayment/Reimbursement

| Accounting/Bank Consulting Exper Event Expense Fees | nse Food/Beverage Expense Travel Polling Expense Travel Printing Expense Office | tion/Fundraising Expense Transportation Equipment & Related Expense Contributions/Donations Made By Out Of District Candidate/Officeholder/Political Committee Overhead/Rental Expense OTHER (enter a category not listed above) lains how to complete this form. |
|--------------------------------------------------------------|---------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 PAGE# | 2 FILER NAME | 3 ACCOUNT # (TEC filers) |
| Schedule: 5/9 Re | I | 0000006 |
| 4 Date | 5 Payee name | |
| 08/01/2014 | Harry, Susan | |
| 6 Amount (\$) | 7 Payee address City; State; Zip Cod | e |
| \$3,000.00 | P.O. Box 301074 Austin, TX 78703 | |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this scheronsulting Expense | dule) (b) Description (If travel outside of Texas, complete Schedule T) Fundraising & compliance consulting |
| EXPENDITURE | | |
| | | Check if Austin, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |
| Date | Payee name | |
| 09/01/2014 | Harry, Susan | |
| Amount (\$) | Payee address City; State; Zip Cod | e |
| \$3,000.00 | P.O. Box 301074 Austin, TX 78703 | |
| PURPOSE OF | Category (See Categories listed at the top of this scher Consulting Expense | Description (If travel outside of Texas, complete Schedule T) Fundraising & compliance consulting |
| EXPENDITURE | | Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |
| Date 08/04/2014 | Payee name Kelly Graphics | |
| Amount (\$) | Payee address City; State; Zip Cod | e |
| \$5,311.88 | 1409 Quaker Ridge Austin, TX 78746 | |
| PURPOSE OF | Category (See Categories listed at the top of this scheil Printing Expense | dule) Description (If travel outside of Texas, complete Schedule T) printing |
| EXPENDITURE | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |
| Date | Payee name | |
| 08/22/2014 | Kelly Graphics | |
| Amount (\$) | Payee address City; State; Zip Cod | e |
| \$78,551.00 | 1409 Quaker Ridge Austin, TX 78746 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this scheen Printing Expense | printing, postage & mailing services |
| L | | Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |

POLITICAL EXPENDITURES

Texas Ethics Commission

direct expenditure to benefit C/OH

SCHEDULE F

EXPENDITURE CATEGORIES Advertising Expense Accounting/Banking Consulting Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Solicitation/Fundraising Expense Travel In District Event Expense Polling Expense Travel Out Of District Fees Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 3 ACCOUNT # (TEC filers) 2 FILER NAME Let's Go Austin PAC Schedule: 6/9 Report: 23/26 00000006 4 Date 5 Payee name 08/29/2014 Kelly Graphics 7 Payee address Amount (\$) City; State; Zip Code 1409 Quaker Ridge \$731.24 Austin, TX 78746 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Printing Expense Printing OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officebolder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 09/04/2014 Localeur Amount (\$) Payee address City; State; Zip Code 127 E. Riverside Dr., Ste. 204 \$5,000.00 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Consulting OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Localeur 09/23/2014 Zip Code Amount (\$) Payee address City; State; 127 E. Riverside Dr., Ste. 204 \$5,000.00 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense consulting OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Michael Edelen Consulting 08/01/2014 Payee address Amount (\$) City; State; Zip Code P.O. Box 141204 \$3,000.00 Austin, TX 78714 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Field services consulting **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking

Gifts/Awards/Memorial Expense Legal Services

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense

| Event Expense | Polling Expense Travel Out Of Dis | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Fees | Printing Expense Office Overhead/ The Instruction Guide explains how | |
| 1 PAGE# | 2 FILER NAME | 3 ACCOUNT # (TEC filers) |
| Schedule: 7/9 Re | T Latte Co. Assette BAC | 0000006 |
| 4 Date | 5 Payee name | |
| 08/29/2014 | Michael Edelen Consulting | |
| 6 Amount (\$) | 7 Payee address City; State; Zip Code | |
| \$3,000.00 | P.O. Box 141204 Austin, TX 78714 | |
| | Ausun, IX 10114 | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description (If travel outside of Texas, complete Schedule T) |
| PURPOSE OF | Consulting Expense | Field services consulting |
| EXPENDITURE | | |
| A Complete ONLY if | Candidate / Officeholder name | Check if Austin, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure | Candidate / Onicendider name | Office sought: Office held: |
| to benefit C/OH | | |
| Date | Payee name | |
| 09/25/2014 Amount (\$) | Piryx, Inc. Payee address City; State; Zip Code | |
| , , , | Payee address City; State; Zip Code 144 2nd St. 1st Floor | |
| \$1,160.09 | San Francisco, CA 94105 | |
| | | |
| DUDDOSE | Category (See Categories listed at the top of this schedule) | Description (If travel outside of Texas, complete Schedule T) |
| PURPOSE OF | Accounting/Banking | credit card processing fees |
| EXPENDITURE | | |
| Complete ONLY if | Candidate / Officeholder name | Office sought: Office held: |
| direct expenditure to benefit C/OH | • | - |
| | 1 | |
| Date | Pavee name | |
| Date 08/18/2014 | Payee name Postmaster | |
| | · | |
| 08/18/2014 | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. | |
| 08/18/2014 Amount (\$) | Postmaster Payee address City; State; Zip Code | |
| 08/18/2014 Amount (\$) | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 | Description // travel sutside of Toyas complete Schodule TI |
| 08/18/2014 Amount (\$) \$147.00 | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) | Description (If travel outside of Texas, complete Schedule T) |
| 08/18/2014 Amount (\$) \$147.00 PURPOSE OF | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 | Description (If travel outside of Texas, complete Schedule T) postage |
| 08/18/2014 Amount (\$) \$147.00 PURPOSE OF EXPENDITURE | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) Printing Expense | postage Check if Austin, TX, officeholder living expense |
| O8/18/2014 Amount (\$) \$147.00 PURPOSE OF EXPENDITURE Complete ONLY if | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) | postage |
| 08/18/2014 Amount (\$) \$147.00 PURPOSE OF EXPENDITURE | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) Printing Expense | postage Check if Austin, TX, officeholder living expense |
| O8/18/2014 Amount (\$) \$147.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) Printing Expense | postage Check if Austin, TX, officeholder living expense |
| O8/18/2014 Amount (\$) \$147.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 09/16/2014 | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) Printing Expense Candidate / Officeholder name Payee name Postmaster | postage Check if Austin, TX, officeholder living expense |
| O8/18/2014 Amount (\$) \$147.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date O9/16/2014 Amount (\$) | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) Printing Expense Candidate / Officeholder name Payee name Postmaster Payee address City; State; Zip Code | postage Check if Austin, TX, officeholder living expense |
| O8/18/2014 Amount (\$) \$147.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 09/16/2014 | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) Printing Expense Candidate / Officeholder name Payee name Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. | postage Check if Austin, TX, officeholder living expense |
| O8/18/2014 Amount (\$) \$147.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date O9/16/2014 Amount (\$) | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) Printing Expense Candidate / Officeholder name Payee name Postmaster Payee address City; State; Zip Code | postage Check if Austin, TX, officeholder living expense |
| O8/18/2014 Amount (\$) \$147.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date O9/16/2014 Amount (\$) | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) Printing Expense Candidate / Officeholder name Payee name Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 | postage Check if Austin, TX, officeholder living expense Office sought: Office held: |
| O8/18/2014 Amount (\$) \$147.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date O9/16/2014 Amount (\$) \$196.00 | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) Printing Expense Candidate / Officeholder name Payee name Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. | postage Check if Austin, TX, officeholder living expense |
| O8/18/2014 Amount (\$) \$147.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date O9/16/2014 Amount (\$) \$196.00 | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) Printing Expense Candidate / Officeholder name Payee name Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) | postage Check if Austin, TX, officeholder living expense Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) |
| O8/18/2014 Amount (\$) \$147.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 09/16/2014 Amount (\$) \$196.00 PURPOSE OF EXPENDITURE | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) Printing Expense Candidate / Officeholder name Payee name Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) Printing Expense | Description (If travel outside of Texas, complete Schedule T) postage Check if Austin, TX, officeholder living expense Description (If travel outside of Texas, complete Schedule T) postage |
| O8/18/2014 Amount (\$) \$147.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 09/16/2014 Amount (\$) \$196.00 PURPOSE OF | Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) Printing Expense Candidate / Officeholder name Payee name Postmaster Payee address City; State; Zip Code 3507 N Lamar Blvd. Austin, TX 78705 Category (See Categories listed at the top of this schedule) | postage Check if Austin, TX, officeholder living expense Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) postage |

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gifts/Awards/Memorial 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)

Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Let's Go Austin PAC Schedule: 8/9 Report: 25/26 0000006 4 Date 5 Payee name Rick's Refills 09/11/2014 Payee address Amount (\$) City; State; Zip Code 6800 West Gate Blvd. \$162.38 #133 Austin, TX 78745 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense office supplies OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 08/04/2014 Rifeline Amount (\$) Payee address City: State: Zip Code P.O. Box 341176 \$10,000.00 Austin, TX 78734 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Consulting Expense Campaign management consulting OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 08/29/2014 Rifeline Payee address Amount (\$) City; State; Zip Code P.O. Box 341176 \$10,000.00 Austin, TX 78734 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Campaign management consulting OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Scheibal, Steve 07/01/2014 Amount (\$) Payee address City; State; Zip Code 1609 Elmhurst Dr. \$2,500.00 Austin, TX 78741 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Consulting Expense Communications consulting OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

Loan Repayment/Reimbursement

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services
Food/Beverage Expense
Polling Expense

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

Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 3 ACCOUNT # (TEC filers) 2 FILER NAME Let's Go Austin PAC Schedule: 9/9 Report: 26/26 00000006 5 Payee name 4 Date Time Warner Cable 09/15/2014 7 Payee address 6 Amount (\$) City; State; Zip Code 12012 North Mopac \$6,000.00 Austin, TX 78758 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Political television advertising **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 08/15/2014 YStrategy Amount (\$) Payee address City; State; Zip Code 3110 Manor Rd. \$6,672.01 Austin, TX 78723 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Consulting Expense Consulting & field services OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name YStrategy 09/04/2014 Amount (\$) Payee address City; State; Zip Code 3110 Manor Rd. \$8.140.95 Austin, TX 78723 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Consulting & field services ΩF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name YStrategy 09/18/2014 Amount (\$) Payee address City; State; Zip Code 3110 Manor Rd. \$12,740.00 Austin, TX 78723 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Consulting Expense consulting and phone calls OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure