# **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

# FORM C/OH COVER SHEET PG 1

1	The C/OH Instruction	Guide explains how	to complete this f	orm. 1.	Filer ID thics Comm	ission Filers)	2. Total pages	s filed:
3	CANDIDATE/	MS/MRS/MR	FIRST	<del> </del>		MI	OFFICE (	JSE ONLY
	OFFICEHOLDER	l 	Stephen				Date Received	
	NAME	NICKNAME	LAST			SUFFIX		
			Adler					
4	CANDIDATE/	ADDRESS /PO BOX:	APT/SUITE #	CITY	STATE:	ZIP CODE		
	OFFICEHOLDER ADDRESS	808 Nueces St	Aus	tin	TX	78701	Date Hand-delivered	<u> </u>
	Change of Address						ر	_ = 1
5	CANDIDATE/	AREA CODE	PHONE NUMBER		EXTENSION	ON	Receipt#	7. T
	OFFICEHOLDER PHONE						ڔٛ	
6	CAMPAIGN	MS/MRS/MR	FIRST			MI	Date Processed	
	TREASURER NAME		Eugene				Date Imaged I	•
		NICKNAME	LAST			SUFFIX	7	
			Sepulveda					. 4
7	CAMPAIGN	STREET ADDRESS:	APT/SUIT	Έ#	CITY	STATE:	ZIP CODE	
	TREASURER ADDRESS (Residence or Business)	3114 Wheeler Street		A	ustin	TX	78705	
ļ_	CAMBAICNI	AREA CODE	PHONE NUMBER		EXTENSION	ON	<del></del>	
8	CAMPAIGN TREASURER PHONE	(512) 970	)-9400					
9	REPORT TYPE	January 15	30th day befor	e election	□R	unoff	15th day aft	er campaign tresurer I (officeholder only)
		July 15	8th day before	election	ΠE	xceeded \$500 limit		(Attach- COH-FR)
10	PERIOD	Month Day	Year		<del>., .</del>	Month	Day Yea	ar
Ľ	COVERED	01/01/2015	·	THRO			06/30/2015	
11	ELECTION	ELECTION DATE Month Day 11/4/2014	Year 🔲	ection tyr Primary Other		Runoff	✓ General	Special
12	OFFICE	OFFICE HELD (if any)	•			Office Soug Other Offic		
	GO TO PAGE 2							

# **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

# FORM C/OH COVER SHEET PG 2

14 C/OH NAME	Stephen Adler		15 Filer ID (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANDIDATE / OF	DITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDIT FICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE V NDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT	WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S		
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
	SPECIFIC	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$0.00		
	2 TOTAL POLITICAL ( (OTHER THAN PLEI	CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$0.00		
EXPENDITURE TOTALS	3 TOTAL POLITICAL E	EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$0.00		
	4 TOTAL POLITICAL EXPENDITURES \$31,077.32				
CONTRIBUTION BALANCE	5 TOTAL POLITICAL OF REPORTING PE	CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY RIOD	\$0.00		
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD	\$418,315.89		
18 AFFIDAVIT	VIRGINIA A. PERRY MY COMMISSION EXPIRES August 31, 2016	I swear, or affirm, under penalty is true and correct and includes a me under Title 15, Election Code	of perjury, that the accompanying report all information required to be reported by		
AFFIX NOTARY STAMP / SEAL ABOVE  Signature of Candidate or Officeholder					
Sworn to and subscribed before me, by the said Steve Adler this the					
day of day of 20 15 to certify which, witness my hand and seal of office.					
Virginia a	Virginia a. Herry Virginia A. Peny				
Signature of officer adn	ninistering oater > Pri	nted varie of officer administering oath	Title of officer administering oath		

### **SUBTOTALS - COH**

## FORM C/OH COVER SHEET PG 3

17.	COMMITTEE NAME Stephen Adler	3. FILER ID (E	thics Commission Filers)
19.	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTALS AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$0.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$0.00
4.	SCHEDULE E: LOANS	\$31,077.32	
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	\$31,077.32	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0.00	
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		
8.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$0.00	
9.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINES	\$0.00	
10.	). SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		
11.	11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS RETURNED TO FILER		

LOANS SCHEDULE E

The ins	struction Guide explains how to complete this fo	Total pages Schedule E:     not available		
2. FILER NAME Stephen Adler		3. Filer ID (Ethics Co	ommission Filers)	
4. TOTAL OF U	INITEMIZED LOANS			\$0.00
5. Date of loan 01/07/2015 6 Is lender a financial Institution?	7. Name of lenderout-of-state PAC Stephen I. Adler 8. Lender address: City State 210 Lavaca St Apt 2605 Austin, TX 78701-4592	e ZIP	Code	9. Loan Amount \$31,077.32 10. Interest rate 0.00% 11. Maturity date
	upation / Job title (See Instructions)  of Collateral	С	(See Instructions) ity of Austin	posited into political account
Inone 15 GUARANTOR INFORMATION	16 Name of guarantor			3 Amount Guaranteed (\$)
not applicable	17 Guarantor address: City Stat	e ZIP	Code	
19 Principal Occi	upation (See Instructions)	20 Empk	oyer (See Instructions)	)

### SCHEDULE F1

#### **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 complete this form.

1. Total pages Schedule F1:  2. FILER NAME Stephen Adler  5. Payee name 01/26/2015  6. Amount S49.03  Expenditure from corporate Office Overhead/Rental Expense  9. Complete ONLY if direct expenditure from corporate FEXPENDITURE  6. Amount S42.49  PURPOSE OF EXPENDITURE  7. Payee address: Office Overhead/Rental Expense Office Overhead/Rental Expense Office Overhead/Rental Expense Office Sought Office Sought Office Sought Office Sought Office Sought Office Fixed or fixed or fixed, complete Schedule T Office held  7. Payee address: Office Overhead/Rental Expense Office Sought Office Sought Office fixed or fixed, complete Schedule T Office held  7. Payee address: Office Overhead/Rental Expense Office Sought Office sought Office held  7. Payee address: Office Overhead/Rental Expense Office Sought Office sought Office held  7. Payee address: Office Overhead/Rental Expense Office Sought Office sought Office held  8. PURPOSE OF EXPENDITURE  8. Payee name 02/24/2015 06. Amount 07. Payee address: Office Overhead/Rental Expense Office Overhead/Renta			
AT&T Mobility   7 Payee address: City: State: Zip Code	Total pages Schedule F1:	1	3. Filer ID (Ethics Commission Filers)
AT&T Mobility   7 Payee address: City: State: Zip Code	4 Date	5 Pavee name	
Superditure from corporate   PO Box 6463 Carol Stream, IL 60197-6463		1 -	
Candidate of Texas, complete Schedule			State: Zip Code
PURPOSE OF EXPENDITURE  9	LJ funds	PO Box 6463 Carol Stream, IL 60197-6463	
expenditure to benefit C/OH  4 Date 02/24/2015 6 Amount S42.49    Expenditure from corporate	PURPOSE OF	•	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
O2/24/2015 AT&T Mobility  6 Amount  \$42.49    Expenditure from corporate		Candidate/Officeholder name	Office sought Office held
6 Amount  \$42.49    Capulate   PO Box 6463 Carol Stream, IL 60197-6463    PURPOSE OF EXPENDITURE   Candidate/Officeholder name   Candidate/Office Overhead/Rental Expense   City: State: Zip Code	4 Date	5 Payee name	
S42.49   PO Box 6463 Carol Stream, IL 60197-6463	02/24/2015	AT&T Mobility	
Separative from corporate   Funds		7 Payee address: City:	State: Zip Code
PURPOSE OF EXPENDITURE  Office Overhead/Rental Expense  Office Overhead/Rental Expense  Office Sought  Office Sought  Office Sought  Office Held  Office Sought  Office Held  Office Held  Office Held  Date 02/24/2015  Farame 02/24/2015  Office Amount  Sold S Congress Ave Ste 400 Austin, TX 78704-1731  PURPOSE OF EXPENDITURE  (a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense  Office Sought  Office Nutside of Texas, complete Schedule Toffice Utilities  Office Utilities  Office Sought  Office held		PO Box 6463 Carol Stream, IL 60197-6463	
expenditure to benefit C/OH  4 Date 02/24/2015 5 Payee name Barton Springs Center, Ltd.  6 Amount 5531.79  Expenditure from corporate  501 S Congress Ave Ste 400 Austin, TX 78704-1731  8  PURPOSE OF EXPENDITURE  (a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense Office Office Utilities  9 Complete ONLY if direct  Candidate/Officeholder name  5 Payee name Barton Springs Center, Ltd.  7 Payee address: City: State: Zip Code  (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Utilities  9 Complete ONLY if direct  Candidate/Officeholder name  City: State:  Zip Code  Office Utilities	PURPOSE OF		Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
Barton Springs Center, Ltd.  6 Amount  \$531.79  Expenditure from corporate  funds  \$01 S Congress Ave Ste 400 Austin, TX 78704-1731   [A) Category (See categories listed at the top of this schedule)  OF  EXPENDITURE  (a) Category (See categories listed at the top of this schedule)  Office Overhead/Rental Expense  Office Utilities  Office Sought  Office held		Candidate/Officeholder name	Office sought Office held
7 Payee address: City: State: Zip Code  \$531.79  Expenditure from corporate  501 S Congress Ave Ste 400 Austin, TX 78704-1731  8  PURPOSE OF EXPENDITURE  (a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense  9 Complete ONLY if direct  Candidate/Officeholder name  Office Sought  Office held	4 Date	5 Payee name	
7 Payee address: City: State: Zip Code  \$531.79  Expenditure from corporate  501 S Congress Ave Ste 400 Austin, TX 78704-1731  8  PURPOSE OF EXPENDITURE  (a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense  9 Complete ONLY if direct  Candidate/Officeholder name  Office Sought  Office held	02/24/2015	Barton Springs Center, Ltd.	
PURPOSE OF OF OF EXPENDITURE  Office Overhead/Rental Expense  Office Overhead/Rental Expense  Office Utilities  Office Sought  Office Sought  Office held	\$531.79  Expenditure from corporate	7 Payee address: City:	State: Zip Code
	PURPOSE OF		Check if travel outside of Texas, complete Schedule T
		Candidate/Officeholder name	Office sought Office held

### SCHEDULE F1

#### 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 complete this form.

	The instruction during explains now to co	<u> </u>	
Total pages Schedule F1:	2. FILER NAME	3. Filer ID (Ethic	cs Commission Filers)
	Stephen Adler		
4 Date	5 Payee name		
01/02/2015	David Butts		
6 Amount \$5,133.33	7 Payee address: City:	State:	Zip Code
Expenditure from corporate funds	1914 Patton Ln Austin, TX 78723-1236		•
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)  Consulting Expense	· =	utside of Texas, complete Schedule T TX, officeholder living expense Itant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
02/24/2015	Edward M. Shack		
6 Amount \$1,560.00	7 Payee address: City:	State:	Zip Code
Expenditure from corporate funds	221 E 9th St Ste 202 Austin, TX 78701-2510		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)  Legal Services	ا ا	utside of Texas, complete Schedule T 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		
01/07/2015	Facebook	^	
6 Amount \$470.66	7 Payee address: City: 1601 Willow Rd Menlo Park, CA 94025-1452	State:	Zip Code
funds			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)  Advertising Expense	· =	utside of Texas, complete Schedule T TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	l Office sought	Office held

### SCHEDULE F1

#### **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)

		i ne instruc	tion Guide explains not	w to complet	e this form.		
1. Total pages Scher	dule F1:	2. FILER NAME			3. Filer ID	(Ethics Commission Filers)	
Ì		Stephen Adler				· )	
4 Date		5 Payee name					
01/12/2015		Frost Bank					
6 Amount		7 Payee address:	City:	į	State:	Zip Code	
	\$4.00						
Expenditure from funds	corporate	2425 Exposition Blvd	Austin, TX 78703-2270				
8		(a) Category (See categ	ories listed at the top of this so	<sub>hedule)</sub> (b)	Description	travel outside of Texas, complete Sched	luto T
PURPOSE OF		Accounting/Banking				Austin, TX, officeholder living expense	
EXPENDITUR	RE	Treesums Balking		Ret	turned Check F	°cc	
9 Complete ONLY if of expenditure to benefit		Candidate/Officeholde	er name	Office	sought	Office held	
4 Date		5 Payee name		<del> </del>		· ·	
01/31/2015		Frost Bank					
6 Amount		7 Payee address:	City:	:	State:	Zip Code	
9	\$10.00						
Expenditure from funds	corporate	2425 Exposition Blvd	Austin, TX 78703-2270				
8		(a) Category (See categ	ories listed at the top of this so	hedule) (b)	Description	travel outside of Texas, complete Sched	ule T
PURPOSE		Accounting/Banking			=	Austin, TX, officeholder living expense	
EXPENDITUR	<b>E</b>	, totouring cuiting		Scr	vice Fee		
0.0		One distant of Office and a late		Office	sought	Office held	<del></del>
9 Complete ONLY if of expenditure to benefit		Candidate/Officeholde	er name	Office	s sought	Office field	
4 Date	•	5 Payee name					
03/31/2015		Frost Bank					
6 Amount		7 Payee address:	City:		State:	Zip Code	
ĺ	\$5.00						
Expenditure from funds	corporate	2425 Exposition Blvd	Austin, TX 78703-2270				س.
8		(a) Category (See categ	ories listed at the top of this so	hedule) (b)	Description	to and and also af Tanana and an area of the control of the contro	
PURPOSE OF					· · · · ·	travel outside of Texas, complete Sched Austin, TX, officeholder living expense	
EXPENDITUR	RE	Accounting/Banking		Ser	vice Fee	red amost rating arbeits	
			,		<del></del>	· · · · · · · · · · · · · · · · · · ·	
9 Complete ONLY if d expenditure to benef		Candidate/Officeholde	er name	Office	e sought	Office held	
	•			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
1							

### SCHEDULE F1

#### **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 co	emplete this form.	
1. Total pages Schedule F1:	2. FILER NAME	3. Filer ID	(Ethics Commission Filers)
	Stephen Adler		
4 Date	5 Payee name		
04/30/2015	Frost Bank		
6 Amount \$5.00	7 Payee address: City:	State:	Zip Code
Expenditure from corporate funds	2425 Exposition Blvd Austin, TX 78703-2270		
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description	travel outside of Texas, complete Schedule T
OF	Accounting/Banking	Check if	Austin, TX, officeholder living expense
EXPENDITURE		Service Fee	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
05/31/2015	Frost Bank		
6 Amount \$5.00	7 Payee address: City: 2425 Exposition Blvd Austin, TX 78703-2270	State:	Zip Code
funds			
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description	travel outside of Texas, complete Schedule T
OF	Accounting/Banking	. =	Austin, TX, officeholder living expense
EXPENDITURE		Service Fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
06/30/2015	Frost Bank		
6 Amount \$5.00	7 Payee address: City:	State:	Zip Code
Expenditure from corporate funds	2425 Exposition Blvd Austin, TX 78703-2270		
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	_ =	travel outside of Texas, complete Schedule T
OF EXPENDITURE	Accounting/Banking	Service Fee	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

### SCHEDULE F1

#### **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 complete this form. 1. Total pages Schedule F1: 2. FILER NAME Filer ID (Ethics Commission Filers) Stephen Adler 4 Date 5 Payee name 02/19/2015 Gregoary A. Copp, Inc. City: Zip Code State: 6 Amount 7 Pavee address: \$637.50 1202 Nueces St Austin, TX 78701-1720 Expenditure from corporate funds (b) Description Check if travel outside of Texas, complete Schedule T 8 (a) Category (See categories listed at the top of this schedule) **PURPOSE** Check if Austin, TX, officeholder living expense OF Accounting/Banking **EXPENDITURE** Quarterly & AnnualPayroll Tax Returns Office held 9 Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH 4 Date 5 Payee name 06/30/2015 Gregoary A. Copp, Inc. State: 7 Payee address: City: Zip Code 6 Amount \$568.75 1202 Nueces St Austin, TX 78701-1720 Expenditure from corporate funds (b) Description Check if travel outside of Texas, complete Schedule T 8 (a) Category (See categories listed at the top of this schedule) **PURPOSE** Check if Austin, TX, officeholder living expense OF Accounting/Banking **EXPENDITURE** Quarterly & AnnualPayroll Tax Returns Office sought Office held 9 Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH 4 Date 5 Payee name 01/15/2015 Laura N Hernandez State: Zip Code 6 Amount Payee address: City: \$1,926.46 2408 Manor Rd 108 Austin, TX 78722 Expenditure from corporate funds 8 (b) Description (a) Category (See categories listed at the top of this schedule) Check if travel outside of Texas, complete Schedule T **PURPOSE** Check if Austin, TX, officeholder living expense **OF** Salaries/Wages/Contract Labor **EXPENDITURE** Salary 9 Complete ONLY if direct Office held Candidate/Officeholder name Office sought

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

expenditure to benefit C/OH

### SCHEDULE F1

#### **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)

<u> </u>	The Instruction Guide (	explains how to cor	nplete this form.	
1. Total pages Schedule F1:	2. FILER NAME		3. Filer ID (Et	hics Commission Filers)
	Stephen Adler			
4 Date	5 Payee name		·	
01/12/2015	Intuit Payroll			
6 Amount \$3.41		City:	State:	Zip Code
Expenditure from corporate funds	2632 Marine Way 2632 Marine W	ay Mountain View, (	JA 94043-1126	•
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the Accounting/Banking	ne top of this schedule)	· ==	el outside of Texas, complete Schedule T tin, 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			
01/19/2015	James McKinney		_	
6 Amount \$375.00  Expenditure from corporate funds	7 Payee address: 6917 Langston Dr Austin, TX 787	City: 23-2219	State:	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the Consulting Expense	ne top of this schedule)	l <u></u>	el outside of Texas, complete Schedule T tin, 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	· • · · · · · · · · · · · · · · · · · ·		
01/07/2015	Christopher Michael			
6 Amount \$150.00		City:	State:	Zip Code
Expenditure from corporate funds	4200 Deerk Dr. A Bastrop, TX 780	302		
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the Event Expense	ne top of this schedule)	. =	el outside of Texas, complete Schedule T tin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
		· · · · · · · · · · · · · · · · · · ·	<del></del>	·

### SCHEDULE F1

#### **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)

a Inctruction Guida avaiging how to complete this form

	The instruction Guide explains now to co	mpiete this form.	
1. Total pages Schedule F1:	2. FILER NAME	3. Filer ID (Ethics C	Commission Filers)
	Stephen Adler		
4 Date	5 Payee name		
01/02/2015	NGP VAN, INC		
6 Amount \$5,046.85	7 Payee address: City:	State:	Zip Code
Expenditure from corporate funds	1101 15th St NW Ste 500 Washington, DC 20005-500		
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)  Fees	1 🛏	e of Texas, complete Schedule T officeholder living expense
EXPENDITURE	rees	Credit Card Processing Fees	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
01/20/2015	NGP VAN, INC		
6 Amount \$2,100.00	7 Payee address: City:	State:	Zip Code
Expenditure from corporate funds	1101 15th St NW Ste 500 Washington, DC 20005-500	6	
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)  Fees	l <b>≔</b>	e of Texas, complete Schedule T officeholder living expense
EXPENDITURE		Credit Card Processing Fees	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date	5 Payee name		
02/02/2015	NGP VAN, INC		
6 Amount	7 Payee address: City:	State:	Zip Code
\$45.62			
Expenditure from corporate funds	1101 15th St NW Ste 500 Washington, DC 20005-500	6	,
8	(a) Category (See categories listed at the top of this schedule)	(b) Description	e of Texas, complete Schedule T
PURPOSE OF	Fees	· ==	officeholder living expense
EXPENDITURE	``	Credit Card Processing Fees	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

### SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Loan R

Accounting/Banking Consulting Expense Event Expense Fees Gift/Awards/Memorials Expe 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 complete this form.

	The instruction Guide explains now to co	implete tille form.
1. Total pages Schedule F1:	2. FILER NAME	3. Filer ID (Ethics Commission Filers)
	Stephen Adler	
4 Date	5 Payee name	
03/02/2015	NGP VAN, INC	
6 Amount \$3.96	7 Payee address: City:	State: Zip Code
Expenditure from corporate funds	1101 15th St NW Ste 500 Washington, DC 20005-500	06
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)  Fees	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fecs
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
01/07/2015	Progressive Waste Solutions of TX, Inc.	
6 Amount \$56.01	7 Payee address: City:	State: Zip Code
Expenditure from corporate funds	PO Box 17608 Austin, TX 78760-7608	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Trash Removal Services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date	5 Payee name	
01/27/2015	Source Spring LLC	
6 Amount \$10,000.00	7 Payee address: City:	State: Zip Code
Expenditure from corporate funds	PO Box 302917 Austin, TX 78703-0049	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)  Advertising Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Umbcl campaign for online ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Legal Services Transportation Equipment & Related Expense Travel In District Consulting Expense Food/Beverage Expense Contributions/Donations Made By **Event Expense** Polling Expense Travel Out Of District Candidate/Officeholder/Political Committee Printing Expense Office Overhead/Rental Expense Fees OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1. Total pages Schedule F1: 2. FILER NAME Filer ID (Ethics Commission Filers) Stephen Adler 4 Date 5 Payee name **TODO Austin** 03/12/2015 City: Zip Code 6 Amount Pavee address: State: \$290.00 1400 Corona Dr Austin, TX 78723-2516 Expenditure from corporate funds (b) Description | Check if travel outside of Texas, complete Schedule T 8 (a) Category (See categories listed at the top of this schedule) **PURPOSE** Check if Austin, TX, officeholder living expense **OF** Advertising Expense **EXPENDITURE** Print Ad 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH 5 Payee name 4 Date 01/15/2015 Jim A Wick State: Zip Code 7 Payee address: City: 6 Amount \$2,052.46 2611 Ektom Dr Apt D Austin, TX 78745-2629 Expenditure from corporate funds

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

Salaries/Wages/Contract Labor

Candidate/Officeholder name

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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**PURPOSE** 

OF

**EXPENDITURE** 

Complete ONLY if direct

expenditure to benefit C/OH

(b) Description | Check if travel outside of Texas, complete Schedule T

Salary

Office sought

Check if Austin, TX, officeholder living expense

Office held