

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1. Filer ID (Ethics Commission Filers)	2. Total pages filed: 13
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR FIRST MI	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX		
4 CANDIDATE/ OFFICEHOLDER ADDRESS	Stephen	Date Received	
	Adler		
4 CANDIDATE/ OFFICEHOLDER ADDRESS	ADDRESS /PO BOX: APT/SUITE # CITY STATE: ZIP CODE	Date Hand-delivered or Date Postmarked	
	808 Nueces St Austin TX 78701		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION	Receipt #	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI	Date Processed	
	NICKNAME LAST SUFFIX		
6 CAMPAIGN TREASURER NAME	Eugene	Date Imaged	
	Sepulveda		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS: APT/SUITE # CITY STATE: ZIP CODE	AUSTIN CITY CLERK RECEIVED 2015 JUL 15 AM 11 24	
	3114 Wheeler Street Austin TX 78705		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION		
	(512) 970-9400		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach- COH-FR)		
	10 PERIOD COVERED	Month Day Year 01/01/2015	THROUGH
11 ELECTION	ELECTION DATE Month Day Year 11/4/2014	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Other	
	12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Other Office: Mayor
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)
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16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
<input type="checkbox"/> additional pages	COMMITTEE CAMPAIGN TREASURER ADDRESS	

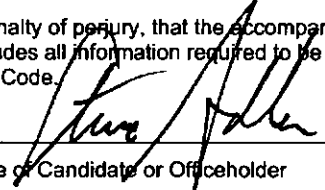
17 CONTRIBUTION TOTALS	1	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$0.00
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$0.00
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$0.00
	4	TOTAL POLITICAL EXPENDITURES	\$31,077.32
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$0.00
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$418,315.89

18 AFFIDAVIT

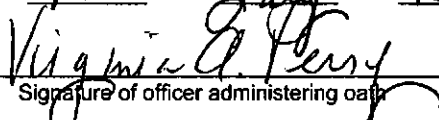


AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.


 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Steve Adler this the 13th day of July 20 15 to certify which, witness my hand and seal of office.


 Signature of officer administering oath

Virginia A. Perry
 Printed name 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 (Ethics 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 CONTRIBUTIONS	\$31,077.32
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$0.00
8. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$0.00
9. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$0.00
10. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS RETURNED TO FILER	\$0.00

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1. Total pages Schedule E: not available	
2. FILER NAME Stephen Adler		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED LOANS		\$0.00	
5. Date of loan 01/07/2015	7. Name of lender <input type="checkbox"/> out-of-state PAC Stephen I. Adler		9. Loan Amount \$31,077.32
6. Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8. Lender address: City State ZIP Code 210 Lavaca St Apt 2605 Austin, TX 78701-4592		10. Interest rate 0.00%
			11. Maturity date
12. Principal occupation / Job title (See Instructions) Mayor		13. Employer (See Instructions) City of Austin	
14. Description of Collateral <input checked="" type="checkbox"/> none		15. Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
15. GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	16. Name of guarantor		18. Amount Guaranteed (\$)
	17. Guarantor address: City State ZIP Code		
19. Principal Occupation (See Instructions)		20. Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:		2. FILER NAME Stephen Adler		3. Filer ID (Ethics Commission Filers)	
4 Date 01/26/2015		5 Payee name AT&T Mobility			
6 Amount \$49.03 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address: City: State: Zip Code PO Box 6463 Carol Stream, IL 60197-6463			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cell phone	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 02/24/2015		5 Payee name AT&T Mobility			
6 Amount \$42.49 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address: City: State: Zip Code PO Box 6463 Carol Stream, IL 60197-6463			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cell phone	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 02/24/2015		5 Payee name Barton Springs Center, Ltd.			
6 Amount \$531.79 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address: City: State: Zip Code 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		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Utilities	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler		3. Filer ID (Ethics Commission Filers)
4 Date 01/02/2015	5 Payee name David Butts		
6 Amount \$5,133.33 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address: City: State: Zip Code 1914 Patton Ln Austin, TX 78723-1236		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Strategy Consultant	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 02/24/2015	5 Payee name Edward M. Shack		
6 Amount \$1,560.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address: City: State: Zip Code 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	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal services	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 01/07/2015	5 Payee name Facebook		
6 Amount \$470.66 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address: City: State: Zip Code 1601 Willow Rd Menlo Park, CA 94025-1452		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Advertising	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler		3. Filer ID (Ethics Commission Filers)
4 Date 01/12/2015	5 Payee name Frost Bank		
6 Amount \$4.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address: City: State: Zip Code 2425 Exposition Blvd Austin, TX 78703-2270		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Returned Check Fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
4 Date 01/31/2015	5 Payee name Frost Bank		
6 Amount \$10.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address: City: State: Zip Code 2425 Exposition Blvd Austin, TX 78703-2270		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
4 Date 03/31/2015	5 Payee name Frost Bank		
6 Amount \$5.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address: City: State: Zip Code 2425 Exposition Blvd Austin, TX 78703-2270		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

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

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler		3. Filer ID (Ethics Commission Filters)
4 Date 02/19/2015	5 Payee name Gregoary A. Copp, Inc.		
6 Amount \$637.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address: City: State: Zip Code 1202 Nueces St Austin, TX 78701-1720		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Quarterly & Annual Payroll Tax Returns	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 06/30/2015	5 Payee name Gregoary A. Copp, Inc.		
6 Amount \$568.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address: City: State: Zip Code 1202 Nueces St Austin, TX 78701-1720		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Quarterly & Annual Payroll Tax Returns	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 01/15/2015	5 Payee name Laura N Hernandez		
6 Amount \$1,926.46 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address: City: State: Zip Code 2408 Manor Rd 108 Austin, TX 78722		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:		2. FILER NAME Stephen Adler		3. Filer ID (Ethics Commission Filers)	
4 Date 01/12/2015		5 Payee name Intuit Payroll			
6 Amount \$3.41 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address: City: State: Zip Code 2632 Marine Way 2632 Marine Way Mountain View, CA 94043-1126			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 01/19/2015		5 Payee name James McKinney			
6 Amount \$375.00 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address: City: State: Zip Code 6917 Langston Dr Austin, TX 78723-2219			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Community Outreach	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 01/07/2015		5 Payee name Christopher Michael			
6 Amount \$150.00 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address: City: State: Zip Code 4200 Deerk Dr. A Bastrop, TX 78602			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:		2. FILER NAME Stephen Adler		3. Filer ID (Ethics Commission Filers)	
4 Date 01/02/2015		5 Payee name NGP VAN, INC			
6 Amount \$5,046.85 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address: City: State: Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held			
4 Date 01/20/2015		5 Payee name NGP VAN, INC			
6 Amount \$2,100.00 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address: City: State: Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held			
4 Date 02/02/2015		5 Payee name NGP VAN, INC			
6 Amount \$45.62 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address: City: State: Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler		3. Filer ID (Ethics Commission Filers)
4 Date 03/02/2015	5 Payee name NGP VAN, INC		
6 Amount \$3.96 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address: City: State: Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
4 Date 01/07/2015	5 Payee name Progressive Waste Solutions of TX, Inc.		
6 Amount \$56.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address: City: State: Zip Code 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 <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> 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 01/27/2015	5 Payee name Source Spring LLC		
6 Amount \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address: City: State: Zip Code 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 <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Umbel campaign for online ads	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:		2. FILER NAME Stephen Adler		3. Filer ID (Ethics Commission Filers)	
4 Date 03/12/2015		5 Payee name TODO Austin			
6 Amount \$290.00 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address: City: State: Zip Code 1400 Corona Dr Austin, TX 78723-2516			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print Ad	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
4 Date 01/15/2015		5 Payee name Jim A Wick			
6 Amount \$2,052.46 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address: City: State: Zip Code 2611 Ektom Dr Apt D Austin, TX 78745-2629			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

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