

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC
COVER SHEET PG 1

| | | | | | |
|--|--|--|--------|---|--|
| The SPAC Instruction Guide explains how to complete this form. | | 1 Filer ID | | 2 Total pages filed: 34 | |
| 3 COMMITTEE NAME Ridesharing Works For Austin | | | | OFFICE USE ONLY Date Received 2016 JUL 15 AM 9 37 RECEIVED AUSTIN CITY CLERK | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 1347 Austin, TX 78767 | | | |
| | | Date Hand-delivered or Date Postmarked | | | |
| | | Receipt # | Amount | | |
| | | Date Processed | | | |
| | | Date Imaged | | | |
| 5 CAMPAIGN TREASURER NAME | | MS / MRS / MR FIRST MI Caroline NICKNAME LAST SUFFIX Joiner | | | |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 208 W. 14th Street Austin TX 78701 | | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 208 W. 14th Street Austin TX 78701 | | | |
| 8 CAMPAIGN TREASURER PHONE | | AREA CODE PHONE NUMBER EXTENSION | | | |
| 9 REPORT TYPE | | <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 Limit <input checked="" type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination | | | |
| 10 PERIOD COVERED | | Month Day Year 04/28/2016 THROUGH 07/15/2016 | | | |
| 11 ELECTION | | ELECTION DATE Month Day Year 05/07/2016 ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special City of Austin Joint General & Special Election | | | |

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

| | | | |
|--|---|--|-------------------|
| 12 COMMITTEE NAME Ridesharing Works For Austin | | 13 Filer ID | |
| 14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder) | <input type="checkbox"/> Candidate <input type="checkbox"/> Officeholder | CANDIDATE / OFFICEHOLDER NAME | |
| | | OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) | |
| | <input checked="" type="checkbox"/> Measure | BALLOT IDENTIFICATION / # Prop 1 | |
| | | DESCRIPTION Repeal and replacement of Austin City Ordinance No. 2015217 | |
| 15 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) | | \$ \$3,212,400.45 |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | | \$ \$0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | | \$ \$2,842,703.95 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ \$0.00 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ \$0.00 |

16 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 Campaign Treasurer

Sworn to and subscribed before me, by the said Caroline Joiner, this the 14th day of July, 2016, to certify which, witness my hand and seal of office.

Samantha Grothe
Signature of officer administering oath

Samantha Grothe
Printed name of officer administering oath

Notary Public
Title of officer administering oath

SUBTOTALS - SPAC**FORM SPAC**
COVER SHEET PG 3
3 of 34**17 COMMITTEE NAME**

Ridesharing Works For Austin

18 Filer ID**19 SCHEDULE SUBTOTALS**

NAME OF SCHEDULE

SUBTOTAL AMOUNT

- | | | | | |
|-----|-------------------------------------|--|----|--------------|
| 1. | <input type="checkbox"/> | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ | |
| 2. | <input type="checkbox"/> | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | |
| 3. | <input type="checkbox"/> | SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ | |
| 4. | <input checked="" type="checkbox"/> | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ | 2,556,682.13 |
| 5. | <input checked="" type="checkbox"/> | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ | 655,718.32 |
| 6. | <input type="checkbox"/> | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ | |
| 7. | <input type="checkbox"/> | SCHEDULE E: LOANS | \$ | |
| 8. | <input checked="" type="checkbox"/> | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | 2,842,703.95 |
| 9. | <input type="checkbox"/> | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ | |
| 10. | <input type="checkbox"/> | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ | |
| 11. | <input type="checkbox"/> | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ | |
| 12. | <input type="checkbox"/> | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ | |
| 13. | <input type="checkbox"/> | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | |
| 14. | <input type="checkbox"/> | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ | |

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule C1: Sch: 1/1 Rpt: 4/34 |
| 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID |
| 4 Date 04/28/2016 | 5 Corporation / Labor Organization name Uber Technologies, Inc. <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | 7 Amount of contribution (\$) \$1,000,000.00 |
| Date 05/04/2016 | Corporation / Labor Organization name Uber Technologies, Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | Amount of contribution (\$) \$500,000.00 |
| Date 05/06/2016 | Corporation / Labor Organization name Uber Technologies, Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | Amount of contribution (\$) \$500,000.00 |
| Date 05/24/2016 | Corporation / Labor Organization name Uber Technologies, Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | Amount of contribution (\$) \$556,682.13 |

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

| | | | |
|--|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule C2: Sch: 1/10 Rpt: 5/34 | |
| 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID | |
| 4 Date 04/28/2016 | 5 Corporation / Labor Organization name Lyft, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | 7 Amount of contribution(\$) \$660.71 | 8 In-kind contribution description In-Kind Campaign Consulting |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 04/28/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$2,360.00 | In-kind contribution description In-Kind Digital Promotion |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 04/28/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$2,810.16 | In-kind contribution description In-Kind Salaries and Overhead |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 04/28/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$267.92 | In-kind contribution description In-Kind Supplies |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 04/28/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$14,569.14 | In-kind contribution description In-Kind Travel and Lodging |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 04/28/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$490.00 | In-kind contribution description In-Kind Food and Beverage |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/02/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$685.71 | In-kind contribution description In-Kind Campaign Consulting |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule C2: Sch: 2/10 Rpt: 6/34 | |
| 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID | |
| 4 Date 05/02/2016 | 5 Corporation / Labor Organization name Lyft, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | 7 Amount of contribution(\$) \$1,800.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | 8 In-kind contribution description In-Kind Digital Promotion |
| Date 05/02/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$630.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Food and Beverage |
| Date 05/02/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$2,197.24 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Salaries and Overhead |
| Date 05/02/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$1,544.90 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Travel and Lodging |
| Date 04/29/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$660.71 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Campaign Consulting |
| Date 04/29/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$2,975.52 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Digital Promotion |
| Date 04/29/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$280.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Food and Beverage |

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

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|---|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule C2: Sch: 3/10 Rpt: 7/34 | |
| 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID | |
| 4 Date 04/29/2016 | 5 Corporation / Labor Organization name Lyft, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | 7 Amount of contribution(\$) \$1,353.75 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | 8 In-kind contribution description In-Kind Salaries and Overhead |
| Date 04/29/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$394.47 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Campaign Supplies |
| Date 04/29/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$541.10 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Travel and Lodging |
| Date 04/30/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$660.71 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Campaign Consulting |
| Date 04/30/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$3,000.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Digital Promotion |
| Date 04/30/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$420.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Food and Beverage |
| Date 04/30/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$180.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Travel and Lodging |

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule C2: Sch: 4/10 Rpt: 8/34 | |
| 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID | |
| 4 Date 05/01/2016 | 5 Corporation / Labor Organization name Lyft, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | 7 Amount of contribution(\$) \$31,890.71 | 8 In-kind contribution description In-Kind Campaign Consulting |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/01/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$1,890.00 | In-kind contribution description In-Kind Digital Promotion |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/01/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$420.00 | In-kind contribution description In-kind food and beverage |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/01/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$419.28 | In-kind contribution description In-Kind Salaries and Overhead |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/01/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$180.00 | In-kind contribution description in-kind travel and lodging |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/03/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$3,430.00 | In-kind contribution description In-Kind Digital Promotion |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/03/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$384.51 | In-kind contribution description In-Kind Supplies |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule C2: Sch: 5/10 Rpt: 9/34 | |
| 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID | |
| 4 Date 05/03/2016 | 5 Corporation / Labor Organization name Lyft, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | 7 Amount of contribution(\$) \$500.00 | 8 In-kind contribution description In-Kind Campaign Consulting |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/03/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$630.00 | In-kind contribution description In-Kind Food and Beverage |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/03/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$3,575.28 | In-kind contribution description In-Kind Salaries and Overhead |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/03/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$557.49 | In-kind contribution description In-Kind Travel and Lodging |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/04/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$500.00 | In-kind contribution description In-Kind Campaign Consulting |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/04/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$250.00 | In-kind contribution description In-Kind Digital Promotion |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/04/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$700.00 | In-kind contribution description In-Kind Food and Beverage |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule C2: Sch: 6/10 Rpt: 10/34 | |
| 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID | |
| 4 Date 05/04/2016 | 5 Corporation / Labor Organization name Lyft, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | 7 Amount of contribution(\$) \$4,497.76 | 8 In-kind contribution description In-Kind Salaries and Overhead |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/04/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$5,461.79 | In-kind contribution description In-Kind Travel and Lodging |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/05/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$1,494.68 | In-kind contribution description In-Kind Digital Promotion |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/05/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$500.00 | In-kind contribution description In-Kind Campaign Consulting |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/05/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$1,913.67 | In-kind contribution description In-Kind Food and Beverage |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/05/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$330.47 | In-kind contribution description In-Kind Supplies |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/05/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$8,010.21 | In-kind contribution description In-Kind Salaries and Overhead |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule C2: Sch: 7/10 Rpt: 11/34 | |
| 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID | |
| 4 Date 05/05/2016 | 5 Corporation / Labor Organization name Lyft, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | 7 Amount of contribution(\$) \$3,567.32 | 8 In-kind contribution description In-Kind Travel and Lodging <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |
| Date 05/06/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$500.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Campaign Consulting |
| Date 05/06/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$10,930.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Digital Promotions |
| Date 05/06/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$2,902.38 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Food and Beverage |
| Date 05/06/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$9,060.18 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Salaries and Overhead |
| Date 05/06/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$448.06 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Supplies |
| Date 05/06/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$480.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | In-kind contribution description In-Kind Travel and Lodging |

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

| | | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule C2: Sch: 8/10 Rpt: 12/34 | |
| 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID | |
| 4 Date 06/29/2016 | 5 Corporation / Labor Organization name Lyft, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | 7 Amount of contribution(\$) \$60,906.29 | 8 In-kind contribution description In-Kind Campaign Consulting |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 06/29/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$13,338.76 | In-kind contribution description In-Kind Food and Beverage |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 06/29/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$12,739.00 | In-kind contribution description In-Kind Salaries and Overhead |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 06/29/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$2,734.75 | In-kind contribution description In-Kind Supplies |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 06/29/2016 | Corporation / Labor Organization name Lyft, Inc. Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104 | Amount of contribution(\$) \$2,725.40 | In-kind contribution description In-Kind Travel and Lodging |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/02/2016 | Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | Amount of contribution(\$) \$16,784.05 | In-kind contribution description In-kind consultant fees for campaign support |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 06/20/2016 | Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | Amount of contribution(\$) \$15,000.00 | In-kind contribution description In-kind consultant fees for campaign support |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

| | | | |
|--|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule C2: Sch: 9/10 Rpt: 13/34 | |
| 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID | |
| 4 Date 06/21/2016 | 5 Corporation / Labor Organization name Uber Technologies, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | 7 Amount of contribution(\$) \$1,000.00 | 8 In-kind contribution description In-Kind Fees for Conferencing Services |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 06/21/2016 | Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | Amount of contribution(\$) \$116,773.20 | In-kind contribution description In-kind consultant fees for campaign support |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 06/21/2016 | Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | Amount of contribution(\$) \$98,396.10 | In-kind contribution description In-kind consultant fees for campaign support |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 06/02/2016 | Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | Amount of contribution(\$) \$57,131.42 | In-kind contribution description In-Kind Retention of Temporary Labor |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 06/23/2016 | Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | Amount of contribution(\$) \$10,000.00 | In-kind contribution description In-kind consultant fees for campaign support |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/15/2016 | Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | Amount of contribution(\$) \$91,711.53 | In-kind contribution description In-Kind Salaries and Overhead |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/15/2016 | Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | Amount of contribution(\$) \$17,465.79 | In-kind contribution description In-Kind Travel and Lodging |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

| | | | |
|--|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule C2: Sch: 10/10 Rpt: 14/34 | |
| 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID | |
| 4 Date 05/15/2016 | 5 Corporation / Labor Organization name Uber Technologies, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | 7 Amount of contribution(\$) \$2,512.04 | 8 In-kind contribution description In-Kind Food and Beverage |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 05/15/2016 | Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | Amount of contribution(\$) \$1,214.16 | In-kind contribution description In-Kind Supplies |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 06/07/2016 | Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | Amount of contribution(\$) \$500.00 | In-kind contribution description In-kind rental of temporary office space. |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Date 06/16/2016 | Corporation / Labor Organization name Uber Technologies, Inc. Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103 | Amount of contribution(\$) \$880.00 | In-kind contribution description In-kind fees for campaign supplies |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | |
|--|---|--|--|------------|
| 1 Total pages Schedule F1: Sch: 1/19 Rpt: 15/34 | | 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID |
| 4 Date 06/15/2016 | | 5 Payee name AKPD Message & Media, LLC | | |
| 6 Amount (\$) \$17,424.58 | | 7 Payee address; City; State; Zip Code 730 N. Franklin St. Ste 404 Chicago, IL 60654 | | |
| 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 Media and ad production | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | | | |
| Candidate/Officeholder name Office sought Office held | | | | |
| Date 05/05/2016 | | Payee name AKPD Message & Media, LLC | | |
| Amount (\$) \$63,481.83 | | Payee address; City; State; Zip Code 730 N. Franklin St. Ste 404 Chicago, IL 60654 | | |
| 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 Media and ad production | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | | | |
| Candidate/Officeholder name Office sought Office held | | | | |
| Date 05/17/2016 | | Payee name AKPD Message & Media, LLC | | |
| Amount (\$) \$57,880.57 | | Payee address; City; State; Zip Code 730 N. Franklin St. Ste 404 Chicago, IL 60654 | | |
| 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 Media and ad production | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | | | |
| Candidate/Officeholder name Office sought Office held | | | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|---|--|---|--|
| 1 Total pages Schedule F1: Sch: 2/19 Rpt: 16/34 | | 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID | |
| 4 Date 06/15/2016 | | 5 Payee name Analytics Media Group LLC | | | |
| 6 Amount (\$) \$50,000.00 | | 7 Payee address; City; State; Zip Code 915 Broadway, Ste 1301 New York, NY 10010 | | | |
| 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 Surveys | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 05/02/2016 | | Payee name Arena Communications | | | |
| Amount (\$) \$19,320.00 | | Payee address; City; State; Zip Code 1780 Sequoia Vista Circle Salt Lake City, UT 84104 | | | |
| 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 Printing services | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 05/09/2016 | | Payee name Arena Communications | | | |
| Amount (\$) \$12,199.00 | | Payee address; City; State; Zip Code 1780 Sequoia Vista Circle Salt Lake City, UT 84104 | | | |
| 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 Design, printing, and layout for door hanger | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 3/19 Rpt: 17/34 | 2 FILER NAME Ridesharing Works For Austin | 3 Filer ID |
| 4 Date 05/03/2016 | 5 Payee name Bully Pulpit Interactive, LLC | |
| 6 Amount (\$) \$250,000.00 | 7 Payee address; City; State; Zip Code 1140 Connecticut Ave. NW Suite 800 Washington, DC 20036 | |
| 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 Video display |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 05/02/2016 | Payee name Considine, Travis | |
| Amount (\$) \$12,500.00 | Payee address; City; State; Zip Code 4713 Avenue G Austin, TX 78751 | |
| 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 Communication consulting services |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/15/2016 | Payee name Convergence Targeted Communications | |
| Amount (\$) \$19,338.18 | Payee address; City; State; Zip Code 1221 Connecticut Ave NW Suite 300 Washington , DC 20036 | |
| 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 Direct mail |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | |
|---|--|--|--|--|
| 1 Total pages Schedule F1: Sch: 4/19 Rpt: 18/34 | | 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID |
| 4 Date 04/28/2016 | | 5 Payee name Frost Bank | | |
| 6 Amount (\$) \$12.00 | | 7 Payee address; City, State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | |
| 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 Wire fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 04/28/2016 | | Payee name Frost Bank | | |
| Amount (\$) \$12.00 | | Payee address; City, State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | |
| 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 Wire fees |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 04/28/2016 | | Payee name Frost Bank | | |
| Amount (\$) \$25.00 | | Payee address; City, State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | |
| 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 Wire fees |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--|
| 1 Total pages Schedule F1: Sch: 5/19 Rpt: 19/34 | | 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID | |
| 4 Date 04/28/2016 | | 5 Payee name Frost Bank | | | |
| 6 Amount (\$) \$25.00 | | 7 Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | | |
| 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 Wire fees | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 04/28/2016 | | Payee name Frost Bank | | | |
| Amount (\$) \$25.00 | | Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | | |
| 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 Wire fees | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 04/29/2016 | | Payee name Frost Bank | | | |
| Amount (\$) \$25.00 | | Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | | |
| 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 Wire fees | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | |
|--|--|---|--|---|
| 1 Total pages Schedule F1: Sch: 6/19 Rpt: 20/34 | | 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID |
| 4 Date 05/02/2016 | | 5 Payee name Frost Bank | | |
| 6 Amount (\$) \$25.00 | | 7 Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | |
| 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 Wire fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought |
| Office held | | | | |
| Date 05/02/2016 | | Payee name Frost Bank | | |
| Amount (\$) \$25.00 | | Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | |
| 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 Wire fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought |
| Office held | | | | |
| Date 05/03/2016 | | Payee name Frost Bank | | |
| Amount (\$) \$25.00 | | Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | |
| 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 Wire fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought |
| Office held | | | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | |
|--|--|---|--|---|
| 1 Total pages Schedule F1: Sch: 7/19 Rpt: 21/34 | | 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID |
| 4 Date 05/04/2016 | | 5 Payee name Frost Bank | | |
| 6 Amount (\$) \$12.00 | | 7 Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | |
| 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 Wire fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought |
| Date 05/04/2016 | | Payee name Frost Bank | | |
| Amount (\$) \$25.00 | | Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | |
| 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 Wire fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office held |
| Date 05/05/2016 | | Payee name Frost Bank | | |
| Amount (\$) \$25.00 | | Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | |
| 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 Wire fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 8/19 Rpt: 22/34 | 2 FILER NAME Ridesharing Works For Austin | 3 Filer ID |
| 4 Date 05/06/2016 | 5 Payee name Frost Bank | |
| 6 Amount (\$) \$12.00 | 7 Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | |
| 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 Wire fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/09/2016 | Candidate/Officeholder name Office sought Office held | |
| Payee name Frost Bank | | |
| Amount (\$) \$25.00 | Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | |
| 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 Wire fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/09/2016 | Candidate/Officeholder name Office sought Office held | |
| Payee name Frost Bank | | |
| Amount (\$) \$25.00 | Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | |
| 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 Wire fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/09/2016 | Candidate/Officeholder name Office sought Office held | |
| Payee name Frost Bank | | |
| Amount (\$) \$25.00 | Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | |
| 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 Wire fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | |
|---|--|--|--|---|
| 1 Total pages Schedule F1: Sch: 9/19 Rpt: 23/34 | | 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID |
| 4 Date 05/09/2016 | | 5 Payee name Frost Bank | | |
| 6 Amount (\$) \$25.00 | | 7 Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | |
| 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 Wire fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 05/17/2016 | | Payee name Frost Bank | | |
| Amount (\$) \$30.00 | | Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | |
| 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 Stop pay fee |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 05/24/2016 | | Payee name Frost Bank | | |
| Amount (\$) \$12.00 | | Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | |
| 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 Wire fees |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|---|--|
| 1 Total pages Schedule F1: Sch: 10/19 Rpt: 24/34 | | 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID | |
| 4 Date 06/15/2016 | | 5 Payee name Frost Bank | | | |
| 6 Amount (\$) \$45.00 | | 7 Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | | |
| 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 Wire transfer charge | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 06/15/2016 | | Payee name Frost Bank | | | |
| Amount (\$) \$25.00 | | Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | | |
| 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 Wire fees | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 06/15/2016 | | Payee name Frost Bank | | | |
| Amount (\$) \$25.00 | | Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | | | |
| 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 Wire fees | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 11/19 Rpt: 25/34 | 2 FILER NAME Ridesharing Works For Austin | 3 Filer ID |
| 4 Date 06/15/2016 | 5 Payee name Frost Bank | |
| 6 Amount (\$) \$25.00 | 7 Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | |
| 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 Wire fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/29/2016 | Payee name Frost Bank | |
| Amount (\$) \$25.00 | Payee address; City; State; Zip Code 100 West Houston St. San Antonio , TX 78205 | |
| 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 Wire fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/09/2016 | Payee name Graves Dougherty Hearon & Moody | |
| Amount (\$) \$4,200.00 | Payee address; City; State; Zip Code Post Office Box 98 Austin, TX 78767 | |
| 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 Attorney fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | |
|---|--|--|--|---|
| 1 Total pages Schedule F1: Sch: 12/19 Rpt: 26/34 | | 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID |
| 4 Date 06/15/2016 | | 5 Payee name Graves Dougherty Hearon & Moody | | |
| 6 Amount (\$) \$7,076.50 | | 7 Payee address; City; State; Zip Code Post Office Box 98 Austin, TX 78767 | | |
| 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 Attorney fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 06/15/2016 | | Payee name Graves Dougherty Hearon & Moody | | |
| Amount (\$) \$9,080.50 | | Payee address; City; State; Zip Code Post Office Box 98 Austin, TX 78767 | | |
| 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 Attorney fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 05/02/2016 | | Payee name Jedburghs, LLC | | |
| Amount (\$) \$48,146.96 | | Payee address; City; State; Zip Code 4871 Silver Springs Drive Park City, UT 84098 | | |
| 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 Campaign management consulting |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | |
|--|--|--|---|------------|
| 1 Total pages Schedule F1: Sch: 13/19 Rpt: 27/34 | | 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID |
| 4 Date 05/09/2016 | | 5 Payee name Jedburghs, LLC | | |
| 6 Amount (\$) \$3,202.18 | | 7 Payee address; City; State; Zip Code 4871 Silver Springs Drive Park City, UT 84098 | | |
| 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 Campaign management consulting | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | | | |
| Date 06/15/2016 | | Payee name Jedburghs, LLC | | |
| Amount (\$) \$8,000.00 | | Payee address; City; State; Zip Code 4871 Silver Springs Drive Park City, UT 84098 | | |
| 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 Campaign management consulting | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | | | |
| Date 05/05/2016 | | Payee name Johnson Strategies, LLC | | |
| Amount (\$) \$37,475.00 | | Payee address; City; State; Zip Code 4612 Dusik Lane Austin, TX 78746 | | |
| 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 Campaign consulting | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | |
|---|--|--|--|---|
| 1 Total pages Schedule F1: Sch: 14/19 Rpt: 28/34 | | 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID |
| 4 Date 05/05/2016 | | 5 Payee name Kelly Graphics | | |
| 6 Amount (\$) \$2,652.13 | | 7 Payee address; City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746 | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Printing 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 Graphic design and printing |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 05/16/2016 | | Payee name Kelly Graphics | | |
| Amount (\$) \$1,747.16 | | Payee address; City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746 | | |
| 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 Advertising, printing, and graphic design |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 05/09/2016 | | Payee name Leffingwell, Lee | | |
| Amount (\$) \$25,000.00 | | Payee address; City; State; Zip Code 4516 Balcones Dr Austin, TX 78731 | | |
| 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 Campaign consulting |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | |
|---|--|---|--|--|
| 1 Total pages Schedule F1: Sch: 15/19 Rpt: 29/34 | | 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID |
| 4 Date 04/28/2016 | | 5 Payee name Link Strategies, LLC | | |
| 6 Amount (\$) \$530,984.00 | | 7 Payee address; City; State; Zip Code 321 E Walnut, Ste 201 Austin, TX 78701 | | |
| 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 Media buy |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 04/29/2016 | | Payee name Link Strategies, LLC | | |
| Amount (\$) \$130,000.00 | | Payee address; City; State; Zip Code 321 E Walnut, Ste 201 Austin, TX 78701 | | |
| 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 Media buy |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 05/02/2016 | | Payee name Link Strategies, LLC | | |
| Amount (\$) \$146,145.00 | | Payee address; City; State; Zip Code 321 E Walnut, Ste 201 Austin, TX 78701 | | |
| 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 Media buy |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|--|--|
| 1 Total pages Schedule F1: Sch: 16/19 Rpt: 30/34 | | 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID | |
| 4 Date 05/04/2016 | | 5 Payee name Link Strategies, LLC | | | |
| 6 Amount (\$) \$7,430.00 | | 7 Payee address; City; State; Zip Code 321 E Walnut, Ste 201 Austin, TX 78701 | | | |
| 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 Media buy | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 05/09/2016 | | Payee name Link Strategies, LLC | | | |
| Amount (\$) \$15,916.00 | | Payee address; City; State; Zip Code 321 E Walnut, Ste 201 Austin, TX 78701 | | | |
| 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 Media buy | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 05/05/2016 | | Payee name M Street Insight LLC | | | |
| Amount (\$) \$10,000.00 | | Payee address; City; State; Zip Code 3039 M Street NW #3 Washington , DC 20007 | | | |
| 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 Opposition research | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | |
|---|--|---|--|--|
| 1 Total pages Schedule F1: Sch: 17/19 Rpt: 31/34 | | 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID |
| 4 Date 05/17/2016 | | 5 Payee name Millan & Company, P.C. | | |
| 6 Amount (\$) \$18,966.15 | | 7 Payee address; City; State; Zip Code 823 Congress Ave, Ste 1330 Austin, TX 78701 | | |
| 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 Accounting fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 05/05/2016 | | Payee name Texas Tribune Inc. | | |
| Amount (\$) \$24,325.00 | | Payee address; City; State; Zip Code 823 Congress Ave Austin, TX 78701 | | |
| 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 Printing services |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 05/09/2016 | | Payee name The Strategy Group, Inc. | | |
| Amount (\$) \$467,507.14 | | Payee address; City; State; Zip Code 730 N Franklin Ste# 404 Chicago, IL 60654-7205 | | |
| 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 Direct mail |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 18/19 Rpt: 32/34 | 2 FILER NAME Ridesharing Works For Austin | 3 Filer ID |
| 4 Date 05/05/2016 | 5 Payee name The Strategy Group, Inc. | |
| 6 Amount (\$) \$300,593.06 | 7 Payee address; City; State; Zip Code 730 N Franklin Ste# 404 Chicago, IL 60654-7205 | |
| 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 Direct mail |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/15/2016 | Candidate/Officeholder name The Strategy Group, Inc. | |
| Amount (\$) \$499,372.04 | Office sought 730 N Franklin Ste# 404 Chicago, IL 60654-7205 | |
| 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 Direct mail |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/11/2016 | Candidate/Officeholder name Thompson & Knight LLP | |
| Amount (\$) \$6,685.46 | Office sought PO Box 660684 Dallas, TX 75266 | |
| 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 Attorney fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Accounting/Banking

Consulting Expense

Contributions/ Donations Made By -

Candidate/Officeholder/Political Committee

Credit Card Payment

Event Expense

Fees

Food/Beverage Expense

Gift/Awards/Memorials Expense

Legal Services

Loan Repayment/Reimbursement

Office Overhead/Rental Expense

Polling Expense

Printing Expense

Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense

Transportation Equipment & Related Expense

Travel in District

Travel Out of District

OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | |
|--|--|---|--|---|
| 1 Total pages Schedule F1: Sch: 19/19 Rpt: 33/34 | | 2 FILER NAME Ridesharing Works For Austin | | 3 Filer ID |
| 4 Date 06/29/2016 | | 5 Payee name Uber Technologies Inc | | |
| 6 Amount (\$) \$35,520.51 | | 7 Payee address; City; State; Zip Code 1455 Market St 4th floor San Francisco, CA 94103 | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Refund | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refund of political contribution |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought |
| | | | | Office held |

**POLITICAL COMMITTEE
AFFIDAVIT OF DISSOLUTION**

FORM PAC-DR

34 of 34

The Instruction Guide explains how to complete this form. **Complete only if "Report Type" on page 1 is marked "Dissolution" **

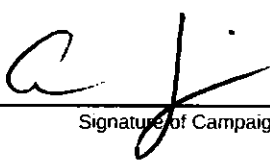
1 COMMITTEE NAME

Ridesharing Works For Austin

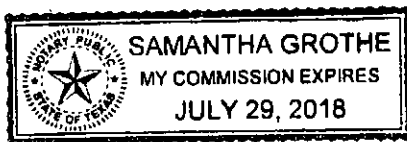
2 Filer ID

3 Affidavit of Dissolution

I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this political committee for this or any other campaign or election for which reporting under the Election Code is required. I declare that all of the information required to be reported by me has been reported. I understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a political committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file.

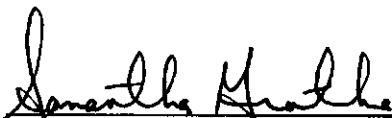

Signature of Campaign Treasurer

DO NOT SIGN UNLESS POLITICAL COMMITTEE IS TO BE DISSOLVED



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Caroline Jainer, this the 14th day of July, 20 16, to certify which, witness my hand and seal of office.


Signature of officer administering oath

Samantha Grothe
Printed name of officer administering oath

Notary Public
Title of officer administering oath