

# 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	
4 COMMITTEE ADDRESS P.O. Box 1347 Austin, TX 78767 <input type="checkbox"/> Change of Address				Date Received	
				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		STREET OR PO BOX;		APT / SUITE #; CITY; STATE; ZIP CODE	
<input type="checkbox"/> Change of Address		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 type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 Limit <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input checked="" type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination			
10 PERIOD COVERED		Month Day Year      Month Day Year 04/28/2016      THROUGH      07/15/2016			
11 ELECTION		ELECTION DATE      ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other 05/07/2016 <input type="checkbox"/> General <input type="checkbox"/> Special      City of Austin Joint General & Special Election			

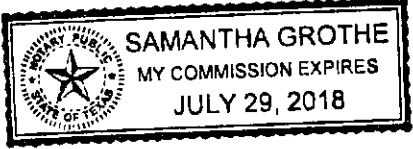
GO TO PAGE 2

# 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

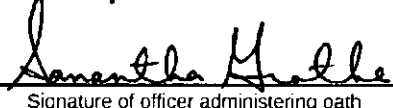


AFFIX NOTARY STAMP / SEAL ABOVE

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.

  
 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

<b>17 COMMITTEE NAME</b> Ridesharing Works For Austin		<b>18 Filer ID</b>	
<b>19 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>	
NAME OF SCHEDULE			
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**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C1: Sch: 1/1 Rpt: 4/34
<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID
<b>4</b> Date 04/28/2016	<b>5</b> Corporation / Labor Organization name Uber Technologies, Inc. <b>6</b> Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	<b>7</b> Amount of contribution (\$) \$1,000,000.00
Date 05/04/2016	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 (\$) \$500,000.00
Date 05/06/2016	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 (\$) \$500,000.00
Date 05/24/2016	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 (\$) \$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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	8 In-kind contribution description In-Kind Campaign Consulting
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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Digital Promotion
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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Salaries and Overhead
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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Supplies
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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Travel and Lodging
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 <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(\$) \$685.71 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Campaign Consulting

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

**SCHEDULE C2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C2: Sch: 2/10 Rpt: 6/34	
<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID	
<b>4</b> Date 05/02/2016	<b>5</b> Corporation / Labor Organization name Lyft, Inc. <b>6</b> Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	<b>7</b> Amount of contribution(\$) \$1,800.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<b>8</b> 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**

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C2: Sch: 4/10 Rpt: 8/34	
<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID	
<b>4</b> Date 05/01/2016	<b>5</b> Corporation / Labor Organization name Lyft, Inc. <b>6</b> Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514  San Francisco, CA 94104	<b>7</b> Amount of contribution(\$) \$31,890.71	<b>8</b> 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**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C2: Sch: 5/10 Rpt: 9/34	
<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID	
<b>4</b> Date 05/03/2016	<b>5</b> Corporation / Labor Organization name Lyft, Inc. <b>6</b> Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514  San Francisco, CA 94104	<b>7</b> Amount of contribution(\$) \$500.00	<b>8</b> 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**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C2: Sch: 6/10 Rpt: 10/34	
<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID	
<b>4</b> Date 05/04/2016	<b>5</b> Corporation / Labor Organization name Lyft, Inc. <b>6</b> Corporation / Labor Organization address; City; State; Zip Code 548 Market St. # 68514 San Francisco, CA 94104	<b>7</b> Amount of contribution(\$) \$4,497.76	<b>8</b> 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

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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	8 In-kind contribution description In-Kind Travel and Lodging
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**

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

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

**SCHEDULE C2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C2: Sch: 9/10 Rpt: 13/34	
<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID	
<b>4</b> Date 06/21/2016	<b>5</b> Corporation / Labor Organization name Uber Technologies, Inc. <b>6</b> Corporation / Labor Organization address; City; State; Zip Code 1455 Market St. 4th Floor San Francisco, CA 94103	<b>7</b> Amount of contribution(\$) \$1,000.00	<b>8</b> 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	8 In-kind contribution description In-Kind Food and Beverage
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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-Kind Supplies
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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-kind rental of temporary office space.
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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description In-kind fees for campaign supplies

# 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.

<b>1</b> Total pages Schedule F1: Sch: 2/19 Rpt: 16/34		<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID
<b>4</b> Date 06/15/2016		<b>5</b> Payee name Analytics Media Group LLC		
<b>6</b> Amount (\$) \$50,000.00		<b>7</b> Payee address; City; State; Zip Code 915 Broadway, Ste 1301  New York, NY 10010		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</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	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Date 05/02/2016		Candidate/Officeholder 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	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</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				
Date 05/09/2016		Candidate/Officeholder 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	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</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				



# 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 <u>ONLY</u> 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 <u>ONLY</u> 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 <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.

<b>1</b> Total pages Schedule F1: Sch: 4/19 Rpt: 18/34		<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID
<b>4</b> Date 04/28/2016		<b>5</b> Payee name Frost Bank		
<b>6</b> Amount (\$) \$12.00		<b>7</b> Payee address; City; State; Zip Code 100 West Houston St.  San Antonio , TX 78205		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</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
<b>9</b> 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.

<b>1</b> Total pages Schedule F1: Sch: 5/19 Rpt: 19/34		<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID
<b>4</b> Date 04/28/2016		<b>5</b> Payee name Frost Bank		
<b>6</b> Amount (\$) \$25.00		<b>7</b> Payee address; City; State; Zip Code 100 West Houston St.  San Antonio , TX 78205		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</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 04/28/2016		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
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 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.

<b>1</b> Total pages Schedule F1: Sch: 7/19 Rpt: 21/34		<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID
<b>4</b> Date 05/04/2016		<b>5</b> Payee name Frost Bank		
<b>6</b> Amount (\$) \$12.00		<b>7</b> Payee address; City; State; Zip Code 100 West Houston St.  San Antonio , TX 78205		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</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
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
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 sought 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 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.

<b>1</b> Total pages Schedule F1: Sch: 8/19 Rpt: 22/34		<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID
<b>4</b> Date 05/06/2016		<b>5</b> Payee name Frost Bank		
<b>6</b> Amount (\$) \$12.00		<b>7</b> Payee address; City; State; Zip Code 100 West Houston St.  San Antonio , TX 78205		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</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
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 05/09/2016		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 05/09/2016		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.

<b>1</b> Total pages Schedule F1: Sch: 9/19 Rpt: 23/34		<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID
<b>4</b> Date 05/09/2016		<b>5</b> Payee name Frost Bank		
<b>6</b> Amount (\$) \$25.00		<b>7</b> Payee address; City; State; Zip Code 100 West Houston St.  San Antonio , TX 78205		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</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
<b>9</b> Complete <u>ONLY</u> 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 <u>ONLY</u> 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 <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: 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.

<b>1</b> Total pages Schedule F1: Sch: 11/19 Rpt: 25/34		<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID
<b>4</b> Date 06/15/2016		<b>5</b> Payee name Frost Bank		
<b>6</b> Amount (\$) \$25.00		<b>7</b> Payee address; City; State; Zip Code 100 West Houston St.  San Antonio , TX 78205		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</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
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
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		Candidate/Officeholder name Office sought Office held		
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		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.

<b>1</b> Total pages Schedule F1: Sch: 12/19 Rpt: 26/34		<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID
<b>4</b> Date 06/15/2016		<b>5</b> Payee name Graves Dougherty Hearon & Moody		
<b>6</b> Amount (\$) \$7,076.50		<b>7</b> Payee address; City; State; Zip Code Post Office Box 98  Austin, TX 78767		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Legal Services		<b>(b)</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
<b>9</b> 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.

<b>1</b> Total pages Schedule F1: Sch: 13/19 Rpt: 27/34		<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID
<b>4</b> Date 05/09/2016		<b>5</b> Payee name Jedburghs, LLC		
<b>6</b> Amount (\$) \$3,202.18		<b>7</b> Payee address; City; State; Zip Code 4871 Silver Springs Drive  Park City, UT 84098		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</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
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Date 06/15/2016		Candidate/Officeholder name Payee name Jedburghs, LLC		
Amount (\$) \$8,000.00		Office sought Payee address; City; State; Zip Code 4871 Silver Springs Drive  Park City, UT 84098		
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</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		Candidate/Officeholder name Payee name Johnson Strategies, LLC		
Amount (\$) \$37,475.00		Office sought Payee address; City; State; Zip Code 4612 Dusik Lane  Austin, TX 78746		
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</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.

<b>1</b> Total pages Schedule F1: Sch: 14/19 Rpt: 28/34	<b>2</b> FILER NAME Ridesharing Works For Austin	<b>3</b> Filer ID
<b>4</b> Date 05/05/2016	<b>5</b> Payee name Kelly Graphics	
<b>6</b> Amount (\$) \$2,652.13	<b>7</b> Payee address; City; State; Zip Code 1409 Quaker Ridge  Austin, TX 78746	
<b>8</b> 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
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/16/2016	Candidate/Officeholder name Payee name Kelly Graphics	
Amount (\$) \$1,747.16	Office sought 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		
Date 05/09/2016	Candidate/Officeholder name Payee name Leffingwell, Lee	
Amount (\$) \$25,000.00	Office sought 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		

# 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.

<b>1</b> Total pages Schedule F1: Sch: 18/19 Rpt: 32/34		<b>2</b> FILER NAME Ridesharing Works For Austin		<b>3</b> Filer ID
<b>4</b> Date 05/05/2016		<b>5</b> Payee name The Strategy Group, Inc.		
<b>6</b> Amount (\$) \$300,593.06		<b>7</b> Payee address; City; State; Zip Code 730 N Franklin Ste# 404  Chicago, IL 60654-7205		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</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	
	<div> <div>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</div> <div> Candidate/Officeholder name Office sought Office held </div> </div>			
<b>Date</b> 06/15/2016		<b>Payee name</b> The Strategy Group, Inc.		
<b>Amount (\$)</b> \$499,372.04		<b>Payee address; City; State; Zip Code</b> 730 N Franklin Ste# 404  Chicago, IL 60654-7205		
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</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	
	<div> <div>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</div> <div> Candidate/Officeholder name Office sought Office held </div> </div>			
<b>Date</b> 05/11/2016		<b>Payee name</b> Thompson & Knight LLP		
<b>Amount (\$)</b> \$6,685.46		<b>Payee address; City; State; Zip Code</b> PO Box 660684  Dallas, TX 75266		
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Legal Services		<b>(b)</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	
	<div> <div>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</div> <div> Candidate/Officeholder name Office sought Office held </div> </div>			



# 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

Printing 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.

<b>1</b> Total pages Schedule F1: Sch: 19/19 Rpt: 33/34	<b>2</b> FILER NAME Ridesharing Works For Austin	<b>3</b> Filer ID
<b>4</b> Date 06/29/2016	<b>5</b> Payee name Uber Technologies Inc	
<b>6</b> Amount (\$) \$35,520.51	<b>7</b> Payee address; City; State; Zip Code 1455 Market St 4th floor  San Francisco, CA 94103	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Refund	<b>(b)</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
<b>9</b> 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.

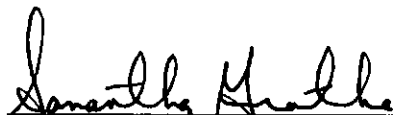
  
Signature of Campaign Treasurer

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 Joiner, this the 14<sup>th</sup> 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