

# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed:		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME		MS / MRS / MR			
FIRST		MI		2016 NOV 3 PM 4:41 AUSTIN CITY CLERK RECEIVED	
NICKNAME		SUFFIX			
4 ORIGINAL REPORT TYPE		LAST		Date Hand-delivered or Date Postmarked	
<input type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input checked="" type="checkbox"/> 8th day before election		<input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input type="checkbox"/> Final report		<input type="checkbox"/> Other (specify) _____ Receipt # _____ Amount \$ _____	
5 ORIGINAL PERIOD COVERED		Month Day Year		Date Processed	
		09 / 30 / 2016 THROUGH 10 / 29 / 2016		Date Imaged	

6 EXPLANATION OF CORRECTION  
 Removed "Requested" + Supplied Occupation + Employer on Donors

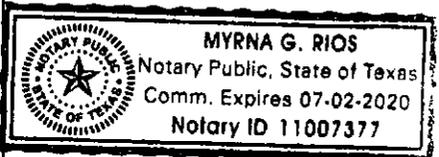
7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

**Semiannual reports:** I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

**Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.



*Sheri Gallo*  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sheri Gallo, this the 3rd day of November, 2016, to certify which, witness my hand and seal of office.

*Myrna Rios*      Myrna Rios      Notary  
 Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID	<b>2</b> Total pages filed: 66
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Sheri	MI
	NICKNAME	LAST Gallo	SUFFIX
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE PO Box 26550  Austin, TX 78755		Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
			<div style="border: 1px solid black; padding: 5px; display: inline-block;">                 2016 NOV 3 11 41                  RECEIVED                  AUSTIN CITY CLERK             </div>
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
<b>8</b> REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
<b>9</b> PERIOD COVERED	Month Day Year 09/30/2016		Month Day Year 10/29/2016
	THROUGH		
<b>10</b> ELECTION	ELECTION DATE Month Day Year 11/08/2016		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
<b>11</b> OFFICE	OFFICE HELD (if any) Austin City Council District 10		<b>12</b> OFFICE SOUGHT (if known) Austin City Council District 10

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

2 of 66

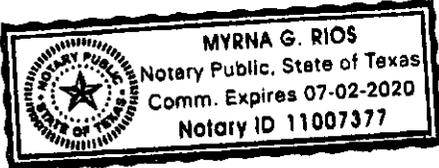
<b>13 C / OH NAME</b> Gallo, Sheri	<b>14 Filer ID</b>
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
<input type="checkbox"/> Additional Pages	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>
	<input checked="" type="checkbox"/> GENERAL	Austin Board of Realtors PAC
	<input type="checkbox"/> SPECIFIC	
		<b>COMMITTEE ADDRESS</b>
		4800 Spicewood Springs Rd.  Austin, TX 78759
		<b>COMMITTEE CAMPAIGN TREASURER NAME</b>
		Chenevert, Emily
		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>
		4800 Spicewood Springs Rd.  Austin, TX 78759

<b>16 CONTRIBUTION TOTALS</b>	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)	\$	44,651.00
<b>EXPENDITURE TOTALS</b>	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	64,438.10
<b>CONTRIBUTION BALANCE</b>	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	26,890.53
<b>OUTSTANDING LOAN TOTALS</b>	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

**17 AFFADAVIT**

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.



AFFIX NOTARY STAMP / SEAL ABOVE

Gallo

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Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Sheri Gallo, this the 3 day of November, 2016, to certify which, witness my hand and seal of office.

[Signature]

---

Signature of officer administering

Myrna Rios

---

Printed name of officer administering

Notary

---

Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Gallo, Sheri	<b>19 Filer ID</b>
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<b>20 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
<b>NAME OF SCHEDULE</b>		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 43,951.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 700.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 56,056.17
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 8,381.93
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/42 Rpt: 4/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/06/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Jon	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 1611 Northwood Rd.  Austin, TX 78703		
<b>8</b> Principal occupation / Job title (See Instructions) Architect		<b>9</b> Employer (See Instructions) Self
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Valerie	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 212 Lavaca St. Ste. 300 Austin, TX 78701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, William	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 212 Lavaca St. Ste. 300 Austin, TX 78701		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Stratus
Date 10/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Attal, Ronald Kenneth	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 6310 Big Cat Cove  Austin, TX 78750		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Board of Realtors PAC	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 4106 Medical Parkway  Austin, TX 78756		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/42 Rpt: 5/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/11/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bagby, W. Gaines	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>6</b> Contributor address; City; State; Zip Code 6501 Rusty Ridge  Austin, TX 78731		
<b>8</b> Principal occupation / Job title (See Instructions) Commercial Real Estate		<b>9</b> Employer (See Instructions) CBRE
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Carol	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 1418 Lance Way  Austin, TX 78758		
Principal occupation / Job title (See Instructions) Public Relations		Employer (See Instructions) Capitol City Insurance
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Randall	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 1418 Lance Way  Austin, TX 78758		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belofsky, Virginia	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 4001 Greystone Dr.  Austin, TX 78731		
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Ginny B Photography
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergstrom, Alan	Amount of Contribution (\$)  \$200.00
Contributor address; City; State; Zip Code 4505 Spicewood Springs Rd. Ste. 104 Austin, TX 78759		
Principal occupation / Job title (See Instructions) Special Accountant		Employer (See Instructions) Eagle Securities

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/42 Rpt: 6/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/16/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bledsoe, Bracton	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>6</b> Contributor address; City; State; Zip Code 1602 Magpie Cv.  Austin, TX 78746		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bledsoe, Mary	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 1602 Magpie Cv.  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyd, Ronald Scott	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 3206 Riva Ridge Rd.  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Sharon McDonald	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 6409 Mesa Dr.  Austin, TX 78731		
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 10/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandes, Robert	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 312 W. Austin St.  Fredericksburg, TX 78624		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/42 Rpt: 7/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/03/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brittman, Marvin	<b>7</b> Amount of Contribution (\$)  \$350.00
	<b>6</b> Contributor address; City; State; Zip Code 6110 Twin Ledge Circle  Austin, TX 78731	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, J.Tim	Amount of Contribution (\$)  \$350.00
	Contributor address; City; State; Zip Code 2201 B Exposition Blvd.  Austin, TX 78703	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Lynda	Amount of Contribution (\$)  \$350.00
	Contributor address; City; State; Zip Code 2201 B Exposition Blvd.  Austin, TX 78703	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bukowski, Sean	Amount of Contribution (\$)  \$350.00
	Contributor address; City; State; Zip Code 505 W. 7th St. Apt. 216 Austin, TX 78701	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bukowski Law Firm
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Erin	Amount of Contribution (\$)  \$350.00
	Contributor address; City; State; Zip Code 9515 Woody Ridge  Austin, TX 78730	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/42 Rpt: 8/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/06/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Kevin	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 9515 Woody Ridge  Austin, TX 78730		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) McKool Smith
Date 10/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caffrey, James P.	Amount of Contribution (\$)  \$150.00
Contributor address; City; State; Zip Code 6417 Wallace Cv.  Austin, TX 78750		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantwell, Cindy	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 4215 Venado Dr.  Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantwell, John	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 4215 Venado Dr.  Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carothers, David	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code 6114 Prestonsire Ln.  Dallas, TX 75225		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/42 Rpt: 9/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/11/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Challener, Elisabeth	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>6</b> Contributor address; City; State; Zip Code 555 E 5th St. # 912 Austin, TX 78701		
<b>8</b> Principal occupation / Job title (See Instructions) Arts Manager		<b>9</b> Employer (See Instructions) ZACH Theatre
Date 10/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, John	Amount of Contribution (\$)  \$150.00
Contributor address; City; State; Zip Code 615 W. 7th St. Apt. 1302 Austin, TX 78701		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, John	Amount of Contribution (\$)  \$200.00
Contributor address; City; State; Zip Code 615 W. 7th St. Apt. 1302 Austin, TX 78701		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Emory	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 4105 Green Cliffs Rd.  Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copland, Ross W.	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 4416 212th St. SW Apt. G3 Mountlake Terrace, WA 98043		
Principal occupation / Job title (See Instructions) EMT, Medic		Employer (See Instructions) City of Austin

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/42 Rpt: 10/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/22/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coronado, Dawn	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>6</b> Contributor address; City; State; Zip Code 5602 Palisade Ct.  Austin, TX 78731		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crorey, Steve	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code PO Box 27168  Austin, TX 78755		
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) Sierra Homes Realty
Date 10/17/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley, Carol	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 5902 Lonesome Valley Trl.  Austin, TX 78731		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/17/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley, Timothy	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 5902 Lonesome Valley Trl.  Austin, TX 78731		
Principal occupation / Job title (See Instructions) Regional President		Employer (See Instructions) Frost Bank
Date 10/22/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danks, Clyde	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 7901 West Rim Dr.  Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/42 Rpt: 11/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/22/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danks, Kay	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code 7901 West Rim Dr.  Austin, TX 78731		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Driver, Susan	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 8 Woodstone Sq.  Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Don	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 3301 Big Bend Dr.  Austin, TX 78731		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PJS of Texas
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrlich, Robert	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 1601 W. 38th St. Ste. 206 Austin, TX 78731		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Robert Ehrlich
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Jim	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 4105 Medical Pkwy. Ste. 210 Austin, TX 78756		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/42 Rpt: 12/66
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/10/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellmer, Rich	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 40 N IH 35 11A2 Austin, TX 78701		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
Date 10/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Jay	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 139 Lone Wolf Ct.  Dripping Springs, TX 78620		
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) Self
Date 10/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fauerbacher, Carl	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 8312 Navidad Dr.  Austin, TX 78735		
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Self
Date 10/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Judy	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 2602 Broken Oak Dr.  Austin, TX 78745		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Robert	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 2602 Broken Oak Dr.  Austin, TX 78745		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/41 Rpt: 13/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/25/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Patrick	<b>7</b> Amount of Contribution (\$)  \$350.00
	<b>6</b> Contributor address; City; State; Zip Code 4638 S. Lamar  Austin, TX 78745	
<b>8</b> Principal occupation / Job title (See Instructions) Construction		<b>9</b> Employer (See Instructions) Flynn Construction
<b>Date</b> 10/16/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Mercedes A.	<b>Amount of Contribution (\$)</b>  \$200.00
	<b>Contributor address; City; State; Zip Code</b> 5900 Waymaker Cv.  Austin, TX 78746	
<b>Principal occupation / Job title (See Instructions)</b> Private Equity Investor		<b>Employer (See Instructions)</b> Self employed
<b>Date</b> 10/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallagher, Belinda	<b>Amount of Contribution (\$)</b>  \$350.00
	<b>Contributor address; City; State; Zip Code</b> 4600 High Gate Dr.  Austin, TX 78730	
<b>Principal occupation / Job title (See Instructions)</b> Homemaker		<b>Employer (See Instructions)</b> NA
<b>Date</b> 10/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallagher, Gary	<b>Amount of Contribution (\$)</b>  \$350.00
	<b>Contributor address; City; State; Zip Code</b> 4600 High Gate Dr.  Austin, TX 78730	
<b>Principal occupation / Job title (See Instructions)</b> V. President		<b>Employer (See Instructions)</b> Integris Semiconductor
<b>Date</b> 10/03/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallo, Anthony	<b>Amount of Contribution (\$)</b>  \$350.00
	<b>Contributor address; City; State; Zip Code</b> PO Box 26550  Austin, TX 78755	
<b>Principal occupation / Job title (See Instructions)</b> SAAS Consulting		<b>Employer (See Instructions)</b> Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/41 Rpt: 14/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/08/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garber, Hailey	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 3105 Westlake Drive  Austin, TX 78746		
<b>8</b> Principal occupation / Job title (See Instructions) Student		<b>9</b> Employer (See Instructions) NA
Date 10/08/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garber, Harrison	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 3105 Westlake Drive  Austin, TX 78746		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) NA
Date 10/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garber, Jennifer	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 600 Fir Court  Norwood, NJ 17648		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garber, Laurie	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 3105 Westlake Dr.  Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garber, Ross	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 3105 Westlake Dr.  Austin, TX 78746		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/41 Rpt: 15/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/03/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garber, Scott J. <b>6</b> Contributor address; City; State; Zip Code 600 Fir Court  Norwood, NJ 17648	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>8</b> Principal occupation / Job title (See Instructions) IT Consultant		<b>9</b> Employer (See Instructions) iTeam Consultants
<b>Date</b> 10/11/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaylord, Eric <b>Contributor address; City; State; Zip Code</b> 5802 Sierra Madre  Austin, TX 78759	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Project Manager		<b>Employer (See Instructions)</b> Sierra Homes Project & Design
<b>Date</b> 10/19/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Giles, Casey <b>Contributor address; City; State; Zip Code</b> 5103 Split Cedar Cr.  Austin, TX 78735	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b> Civil Engineer		<b>Employer (See Instructions)</b> PSW
<b>Date</b> 10/03/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Goff, Eric <b>Contributor address; City; State; Zip Code</b> 2500 E. 2nd St.  Austin, TX 78702	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Director		<b>Employer (See Instructions)</b> Citigroup
<b>Date</b> 10/27/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Golding, Rob <b>Contributor address; City; State; Zip Code</b> 4008 Idlewild Rd.  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/41 Rpt: 16/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/06/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Arthur A.	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 1700 Ravey St. # B Austin, TX 78704		
<b>8</b> Principal occupation / Job title (See Instructions) Architect		<b>9</b> Employer (See Instructions) Volume Studios
Date 10/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Chuck	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 811 E. 11th St. # 432 Austin, TX 78702		
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Spire Foot
Date 10/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregorcyk, David	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 3200 Grandview # 6 Austin, TX 78705		
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Journeyman Group
Date 10/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregorcyk, Jennifer	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 3200 Grandview # 6 Austin, TX 78705		
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Hahn Public Communciations
Date 10/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HDR, Inc. PAC	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 8404 Indian Hills Dr.  Omaha, NE 68114		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/41 Rpt: 17/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/14/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HNTB Holdings LTD PAC  <b>6</b> Contributor address; City; State; Zip Code 715 Kick Dr.  Kansas City, MO 64105	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 10/27/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanslik, Edward  <b>Contributor address; City; State; Zip Code</b> 5800 Kentucky Derby  Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/20/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hay, John  <b>Contributor address; City; State; Zip Code</b> 2103 Sharon Ln.  Austin, TX 78703	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Attorney		<b>Employer (See Instructions)</b> The Hay Legal Group PLLC
<b>Date</b> 10/14/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Herring, Lisa  <b>Contributor address; City; State; Zip Code</b> 1000 E. 38th St.  Austin, TX 78705	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/14/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Herring, William  <b>Contributor address; City; State; Zip Code</b> 1000 E. 38th St.  Austin, TX 78705	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/41 Rpt: 18/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/18/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobby, William	<b>7</b> Amount of Contribution (\$)  \$350.00
	<b>6</b> Contributor address; City; State; Zip Code PO Box 326  Houston, TX 77001	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
<b>Date</b> 10/03/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooser, Greg	<b>Amount of Contribution (\$)</b>  \$350.00
	<b>Contributor address; City; State; Zip Code</b> 4501 Westlake Dr. # 14 Austin, TX 78746	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> NA
<b>Date</b> 10/16/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoover, Nancy D.	<b>Amount of Contribution (\$)</b>  \$50.00
	<b>Contributor address; City; State; Zip Code</b> 3201 Riva Ridge Rd.  Austin, TX 78746	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobson, Benjamin	<b>Amount of Contribution (\$)</b>  \$350.00
	<b>Contributor address; City; State; Zip Code</b> 5500 Kite Tail Dr.  Austin, TX 78730	
<b>Principal occupation / Job title (See Instructions)</b> Oil & Gas		<b>Employer (See Instructions)</b> Self
<b>Date</b> 10/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobson, Janine	<b>Amount of Contribution (\$)</b>  \$350.00
	<b>Contributor address; City; State; Zip Code</b> 5500 Kite Tail Dr.  Austin, TX 78730	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> NA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/41 Rpt: 19/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/14/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Robert	<b>7</b> Amount of Contribution (\$) \$350.00
	<b>6</b> Contributor address; City; State; Zip Code 1404 Ethridge  Austin, TX 78703	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) ABC Home & Commercial Services
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kathy	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 4105 Shimmering Cv.  Austin, TX 78731	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Tom	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 4105 Shimmering Cv.  Austin, TX 78731	
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) AGC of Texas
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justit, Manuel J.	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code 4806 Precipice Cove  Austin, TX 78731	
Principal occupation / Job title (See Instructions) Dean		Employer (See Instructions) University of Texas
Date 10/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaspar, Ma	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 10521 Pointe View Dr.  Austin, TX 78738	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/41 Rpt: 20/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/06/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsey, Douglas	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 11200 Deadoak Ln.  Austin, TX 78759		
<b>8</b> Principal occupation / Job title (See Instructions) Physical Therapist		<b>9</b> Employer (See Instructions) The Kelsey Group
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsey, Ellen	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 11200 Deadoak Ln.  Austin, TX 78759		
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions) Austin Porfolio Real Estate
Date 10/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khataw, Ali Raza	Amount of Contribution (\$)  \$175.00
Contributor address; City; State; Zip Code 7914 Bee Caves Rd.  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khataw, Nahid	Amount of Contribution (\$)  \$175.00
Contributor address; City; State; Zip Code 7914 Bee Caves Rd.  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kochwelp, Bill	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 10101 Eastman Cv.  Austin, TX 78750		
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) First Austin Properties

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/41 Rpt: 21/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/24/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kumar, Hema	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 1628 Westlake Dr.  Austin, TX 78746		
<b>8</b> Principal occupation / Job title (See Instructions) Accounting		<b>9</b> Employer (See Instructions) Journeyman Construction
Date 10/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kumar, Sam	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 1628 Westlake Dr.  Austin, TX 78746		
Principal occupation / Job title (See Instructions) Owner/President		Employer (See Instructions) Journeyman Construction
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamon, Matthew	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 2605 Enfield Rd. # 217 Austin, TX 78703		
Principal occupation / Job title (See Instructions) Elected Official Staff		Employer (See Instructions) State of Texas
Date 10/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landrey, Zachary	Amount of Contribution (\$)  \$150.00
Contributor address; City; State; Zip Code 2401 Never Bend Cv.  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger, Dale	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 3 Niles Rd  Austin, TX 78703		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 19/41 Rpt: 22/65
2 FILER NAME Gallo, Sheri		3 Filer ID
4 Date 10/15/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger, Libby	7 Amount of Contribution (\$)  \$350.00
6 Contributor address; City; State; Zip Code 3 Niles Rd  Austin, TX 78703		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 10/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Littlefield, Jennifer	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code 7906 Henry Kinney Row  Austin, TX 78749		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Littlefield, Mark	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code 7906 Henry Kinney Row  Austin, TX 78749		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockart, James	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code PO Box 27187  Austin, TX 78755		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Locke Lord LLP Firm PAC	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 2200 Ross Ave. Ste. 2200 Dallas, TX 75201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/41 Rpt: 23/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/14/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockwood, Andrews, & Newman PAC <b>6</b> Contributor address; City; State; Zip Code 2925 Briarpark Dr. Ste. 400 Houston, TX 77042	<b>7</b> Amount of Contribution (\$) \$350.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loukas, Demetrius Contributor address; City; State; Zip Code 4611 Ridge Oak Dr. Austin, TX 78731	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Oncologist		Employer (See Instructions) Texas Oncology
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loukas, Janis Contributor address; City; State; Zip Code 4611 Ridge Oak Dr. Austin, TX 78731	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch, Michele Rogerson Contributor address; City; State; Zip Code 5520 Wild Foxglove Rd. Spicewood, TX 78669	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madere, Pamela Contributor address; City; State; Zip Code 4207 Bennedict Lane Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Coats, Rose

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/41 Rpt: 24/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/09/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maier, Richard	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 704 E. 45th 1/2 St.  Austin, TX 78751		
<b>8</b> Principal occupation / Job title (See Instructions) Homebuilder		<b>9</b> Employer (See Instructions) Lenmar
Date 10/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Cindy	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 6413 Williams Ridge Way  Austin, TX 78731		
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) ASSO Management
Date 10/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Michael	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 6413 Williams Ridge Way  Austin, TX 78731		
Principal occupation / Job title (See Instructions) ASSO Executive		Employer (See Instructions) ASSO Management
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martine, Carol	Amount of Contribution (\$)  \$175.00
Contributor address; City; State; Zip Code 836 Old Spicewood Rd.  Cypress Mill, TX 78663		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Martine Properties
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martine, Tom	Amount of Contribution (\$)  \$175.00
Contributor address; City; State; Zip Code 836 Old Spicewood Rd.  Cypress Mill, TX 78663		
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Martine Properties

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/41 Rpt: 25/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/16/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, David	<b>7</b> Amount of Contribution (\$)  \$125.00
<b>6</b> Contributor address; City; State; Zip Code 2706 Macken St.  Austin, TX 78703		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Mary	Amount of Contribution (\$)  \$125.00
Contributor address; City; State; Zip Code 2706 Macken St.  Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKay, Kathleen	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 11339 Taylor Draper Ln.  Austin, TX 78759		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKay, Thomas	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 11339 Taylor Draper Ln.  Austin, TX 78759		
Principal occupation / Job title (See Instructions) Businessman		Employer (See Instructions) Tom's Way, Inc.
Date 10/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metcalfe, Sally	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code 388 Cortona Dr.  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/41 Rpt: 26/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/13/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metcalf, Steven  <b>6</b> Contributor address; City; State; Zip Code 388 Cortona Dr.  Austin, TX 78746	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Don A.  Contributor address; City; State; Zip Code 9001 Wintercreeper Cv.  Austin, TX 78735	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) The County Line
Date 10/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Vanessa  Contributor address; City; State; Zip Code 9001 Wintercreeper Cv.  Austin, TX 78735	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) The County Line
Date 10/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moble, Ann  Contributor address; City; State; Zip Code 2801 W. 35th St.  Austin, TX 78703	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moble, John  Contributor address; City; State; Zip Code 2801 W. 35th St.  Austin, TX 78703	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/41 Rpt: 27/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/12/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moceri, Closs	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 12611 Cedar St.  Austin, TX 78732		
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Developer		<b>9</b> Employer (See Instructions) Presidium Group, LLC
Date 10/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moceri, Susan	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 12611 Cedar St.  Austin, TX 78732		
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) NA
Date 10/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, Putnam	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 4705 Balcones Dr.  Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) More, George	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 2904 Hillview Rd.  Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) More, Marion	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 2904 Hillview Rd.  Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/41 Rpt: 28/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/11/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Bill	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code 10605 Spicewood Club Dr.  Austin, TX 78750		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Suzy	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code 100 Lido Circle B-1 Lakeway, TX 78734		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moulinet, Nick	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 15201 Gebron Dr.  Lakeway, TX 78734		
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Stantec
Date 10/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niendorff, Frank	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 2900 Pecos  Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niendorff, Kathleen	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 2900 Pecos  Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/41 Rpt: 29/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/13/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Novy, Brian M.	<b>7</b> Amount of Contribution (\$)  \$125.00
<b>6</b> Contributor address; City; State; Zip Code 3913 Edgerock Dr.  Austin, TX 78731		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Novy, Ilene L.	Amount of Contribution (\$)  \$125.00
Contributor address; City; State; Zip Code 3913 Edgerock Dr.  Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Lauren	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 3702 Soaring Eagle  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Christian	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 1114 Lost Creek Blvd. Ste. 200 Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pike, Debbie	Amount of Contribution (\$)  \$175.00
Contributor address; City; State; Zip Code 101 Colorado St. Ste. 3402 Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/41 Rpt: 30/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/11/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pike Jr., HM	<b>7</b> Amount of Contribution (\$)  \$175.00
<b>6</b> Contributor address; City; State; Zip Code 101 Colorado St. Ste. 3402 Austin, TX 78701		
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions) The Sutton Co.
Date 10/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Portnoy, Steven	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 7617 Journeyville Dr.  Austin, TX 78735		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 10/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Rebecca	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 1036 Liberty Park Dr. # 36 Austin, TX 78746		
Principal occupation / Job title (See Instructions) Agent		Employer (See Instructions) Watkins Insurance Group
Date 10/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Rob	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 4016 Sierra Dr.  Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raven, Joyce	Amount of Contribution (\$)  \$125.00
Contributor address; City; State; Zip Code 7304 Reed Dr.  Leander, TX 78641		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/41 Rpt: 31/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/04/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raven, Louie	<b>7</b> Amount of Contribution (\$)  \$125.00
<b>6</b> Contributor address; City; State; Zip Code 7304 Reed Dr.  Leander, TX 78641		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/17/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Billy	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 4100 McBrine Pl.  Austin, TX 78746		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Reagan Outdoor Advertising
Date 10/17/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Lucy	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 4100 McBrine Pl.  Austin, TX 78746		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) NA
Date 10/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodus, David T.	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code PO Box 65  Guffey, CO 80820		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riordan, Lydia	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 10606 Oak Valley Ct.  Austin, TX 78736		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/41 Rpt: 32/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/24/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riordan, Patrick	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address; City; State; Zip Code 10606 Oak Valley Ct.  Austin, TX 78736		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 10/07/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodrigues, Jose J.	<b>Amount of Contribution (\$)</b> \$350.00
<b>Contributor address; City; State; Zip Code</b> U Shell St.  New Bedford, MA 12744		
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> NA
<b>Date</b> 10/05/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubin, Jay	<b>Amount of Contribution (\$)</b> \$100.00
<b>Contributor address; City; State; Zip Code</b> 10609 McFarlie Cove  Austin, TX 78750		
<b>Principal occupation / Job title (See Instructions)</b> NonProfit Consultant		<b>Employer (See Instructions)</b> Self
<b>Date</b> 10/02/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert	<b>Amount of Contribution (\$)</b> \$250.00
<b>Contributor address; City; State; Zip Code</b> 4200 Jackson Ave. Apt. 5015 Austin, TX 78731		
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> NA
<b>Date</b> 10/22/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sager, Alan	<b>Amount of Contribution (\$)</b> \$350.00
<b>Contributor address; City; State; Zip Code</b> 7801 N. Lamar A114 Austin, TX 78752		
<b>Principal occupation / Job title (See Instructions)</b> Entrepreneur		<b>Employer (See Instructions)</b> Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/41 Rpt: 33/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/22/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sager, Susan	<b>7</b> Amount of Contribution (\$)  \$350.00
	<b>6</b> Contributor address; City; State; Zip Code 7801 N. Lamar A114 Austin, TX 78752	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
<b>Date</b> 10/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Salomon, Bruce	<b>Amount of Contribution (\$)</b>  \$350.00
	<b>Contributor address; City; State; Zip Code</b> 4911 Elizabeth Jane Ct.  Austin, TX 78730	
<b>Principal occupation / Job title (See Instructions)</b> Finance		<b>Employer (See Instructions)</b> Eiberon LLC
<b>Date</b> 10/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Salomon, Linda	<b>Amount of Contribution (\$)</b>  \$350.00
	<b>Contributor address; City; State; Zip Code</b> 4911 Elizabeth Jane Ct.  Austin, TX 78730	
<b>Principal occupation / Job title (See Instructions)</b> Homemaker		<b>Employer (See Instructions)</b> NA
<b>Date</b> 10/27/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Saunders, Stephen	<b>Amount of Contribution (\$)</b>  \$100.00
	<b>Contributor address; City; State; Zip Code</b> 2630 Exposition Blvd. Ste. 203 Austin, TX 78703	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/18/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Schele, David	<b>Amount of Contribution (\$)</b>  \$50.00
	<b>Contributor address; City; State; Zip Code</b> 5604 Lemonwood Dr.  Austin, TX 78731	
<b>Principal occupation / Job title (See Instructions)</b> Architect		<b>Employer (See Instructions)</b> Felder Group Architects

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/41 Rpt: 34/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/06/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmitt, Karla	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 8809 Mount Batten Circle  Austin, TX 78730		
<b>8</b> Principal occupation / Job title (See Instructions) Administration Assistant		<b>9</b> Employer (See Instructions) Ranstad
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmitt, Sandra	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 8809 Mount Batten Circle  Austin, TX 78730		
Principal occupation / Job title (See Instructions) UCB Designer		Employer (See Instructions) Edgenuity
Date 10/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Robert	Amount of Contribution (\$)  \$101.00
Contributor address; City; State; Zip Code 4105 Cat Mountain Dr.  Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Bradley S.	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 299 S. Main St. Ste. 1300 Salt Lake City, UT 84111		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Summit Injury Law
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Marietta	Amount of Contribution (\$)  \$175.00
Contributor address; City; State; Zip Code 2901 Oakhurst  Austin, TX 78703		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Wilson Goldrick

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/41 Rpt: 35/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/11/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott III, Wallace	<b>7</b> Amount of Contribution (\$)  \$175.00
<b>6</b> Contributor address; City; State; Zip Code 2901 Oakhurst  Austin, TX 78703		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) The Sutton Company
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sellers, Araminta	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 3307 Perry Ln.  Austin, TX 78731		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sellers, Tom	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 3307 Perry Ln.  Austin, TX 78731		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Conoco Phillips
Date 10/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shiv, Chester	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 1285 Sutter St. Unit 802 San Francisco, CA 94109		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Emerald Therapeutics, Inc.
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, Jennifer	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 11 Cousteau Ln.  Austin, TX 78746		
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Skinner Transportaion

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/41 Rpt: 36/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/03/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, LeAnne	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 4127 Honeycomb Rock Circle  Austin, TX 78731		
<b>8</b> Principal occupation / Job title (See Instructions) Dietician		<b>9</b> Employer (See Instructions) Austin Nutrition Consultants
Date 10/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner II, Stephen	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 11 Cousteau Ln.  Austin, TX 78746		
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Skinner Transportaion
Date 10/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, Steve	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 4127 Honeycomb Rock Circle  Austin, TX 78731		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Skinner Transportation
Date 10/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Terral	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 6304 Cat Mountain Cv.  Austin, TX 78731		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 10/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soeur, Channy	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 7908 Cameron Rd  Austin, TX 78754		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) CAS Consulting

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/41 Rpt: 37/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/13/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soeur, Laura	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 7908 Cameron Rd  Austin, TX 78754		
<b>8</b> Principal occupation / Job title (See Instructions) Manager		<b>9</b> Employer (See Instructions) CAS Consulting
Date 10/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Straub, Joseph	Amount of Contribution (\$)  \$125.00
Contributor address; City; State; Zip Code 7903 Jester Blvd.  Austin, TX 78750		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Straub, Kim	Amount of Contribution (\$)  \$125.00
Contributor address; City; State; Zip Code 7903 Jester Blvd.  Austin, TX 78750		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Donald	Amount of Contribution (\$)  \$113.00
Contributor address; City; State; Zip Code 4105 Long Champ Dr.  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Loraine	Amount of Contribution (\$)  \$112.00
Contributor address; City; State; Zip Code 4105 Long Champ Dr.  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/41 Rpt: 38/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/25/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Connee	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 2904 Waterbank Cv.  Austin, TX 78746		
<b>8</b> Principal occupation / Job title (See Instructions) Interim General Director		<b>9</b> Employer (See Instructions) Austin Opera
Date 10/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Kent	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 2904 Waterbank Cv.  Austin, TX 78746		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jackson Walker
Date 10/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swan, Laurie J.	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 1611 Northwood Rd.  Austin, TX 78703		
Principal occupation / Job title (See Instructions) V.President		Employer (See Instructions) Stratus
Date 10/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson Jr., A. Leon	Amount of Contribution (\$)  \$200.00
Contributor address; City; State; Zip Code 1301 Capital of Tx Hwy S. Ste. A234 Austin, TX 78741		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Thompson Properties
Date 10/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, William	Amount of Contribution (\$)  \$200.00
Contributor address; City; State; Zip Code 1010 Mopac Circle  Austin, TX 78746		
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/41 Rpt: 39/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/24/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, Wissie	<b>7</b> Amount of Contribution (\$) \$200.00
<b>6</b> Contributor address; City; State; Zip Code 1010 Mopac Circle  Austin, TX 78746		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
<b>Date</b> 10/09/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Jeff	<b>Amount of Contribution (\$)</b> \$250.00
<b>Contributor address; City; State; Zip Code</b> 3604 Westlake Dr.  Austin, TX 78746		
<b>Principal occupation / Job title (See Instructions)</b> Real Estate Broker		<b>Employer (See Instructions)</b> EDGE Realty Partners
<b>Date</b> 10/25/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Unruh, Justin	<b>Amount of Contribution (\$)</b> \$100.00
<b>Contributor address; City; State; Zip Code</b> 1704 West Ave. # 304 Austin, TX 78701		
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/04/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDeGraaf, Margaret	<b>Amount of Contribution (\$)</b> \$25.00
<b>Contributor address; City; State; Zip Code</b> 5315 Valburn Cr.  Austin, TX 78731		
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/04/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDeGraaf, William	<b>Amount of Contribution (\$)</b> \$25.00
<b>Contributor address; City; State; Zip Code</b> 5315 Valburn Cr.  Austin, TX 78731		
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/41 Rpt: 40/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/04/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Von Dohlen, Chris	<b>7</b> Amount of Contribution (\$)  \$175.00
<b>6</b> Contributor address; City; State; Zip Code 1406 Kent Ln.  Austin, TX 78703		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Von Dohlen, Teresa	Amount of Contribution (\$)  \$175.00
Contributor address; City; State; Zip Code 1406 Kent Ln.  Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Auddie	Amount of Contribution (\$)  \$125.00
Contributor address; City; State; Zip Code 2303 Cheswick Ct.  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Danny	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 209 Jaydee Terrace  Georgetown, TX 78628		
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Self
Date 10/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Diana	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 209 Jaydee Terrace  Georgetown, TX 78628		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/41 Rpt: 41/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/04/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Dillon	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>6</b> Contributor address; City; State; Zip Code 2101 Griswold Lane  Austin, TX 78703		
<b>8</b> Principal occupation / Job title (See Instructions) Business Development		<b>9</b> Employer (See Instructions) Self
Date 10/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Philip	Amount of Contribution (\$)  \$125.00
Contributor address; City; State; Zip Code 2303 Cheswick Ct.  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Fred	Amount of Contribution (\$)  \$125.00
Contributor address; City; State; Zip Code 9302 Knoll Crest Loop  Austin, TX 78759		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Ginger	Amount of Contribution (\$)  \$125.00
Contributor address; City; State; Zip Code 9302 Knoll Crest Loop  Austin, TX 78759		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheelus, Cleveland Daniel	Amount of Contribution (\$)  \$350.00
Contributor address; City; State; Zip Code 3103 Bee Caves Rd. Ste. 201 Austin, TX 78746		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wheelus Law

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/41 Rpt: 42/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/16/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheelus, Estella  <b>6</b> Contributor address; City; State; Zip Code 3103 Bee Caves Rd. Ste. 201 Austin, TX 78746	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
<b>Date</b> 10/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Leon A.  <b>Contributor address; City; State; Zip Code</b> 3909 Rockledge Dr.  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> 		<b>Employer (See Instructions)</b> 
<b>Date</b> 10/04/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilhite, Phillip  <b>Contributor address; City; State; Zip Code</b> 5326 Western Hills  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> M&A Professional		<b>Employer (See Instructions)</b> Self
<b>Date</b> 10/13/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Talley  <b>Contributor address; City; State; Zip Code</b> 8209 Dark Ridge Cv.  Austin, TX 78737	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> 		<b>Employer (See Instructions)</b> 
<b>Date</b> 10/24/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Brent  <b>Contributor address; City; State; Zip Code</b> 3401 Fritz Hughes Park Rd.  Austin, TX 78723	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Project R&D		<b>Employer (See Instructions)</b> Journeyman Construction

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/41 Rpt: 43/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/16/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rogers	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>6</b> Contributor address; City; State; Zip Code 5902 N. West Pl.  Austin, TX 78731		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Ross	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 811 Christopher St.  Austin, TX 78704		
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) PSW
Date 10/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Sandra	Amount of Contribution (\$)  \$150.00
Contributor address; City; State; Zip Code 5902 N. West Pl.  Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winstead, Pete	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code 79 Pascal Ln.  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winstead, Tomi	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code 79 Pascal Ln.  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/41 Rpt: 44/65
<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/16/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, David Trevor	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code 3205 Riva Ridge Rd.  Austin, TX 78746		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wojtevicz, Chris	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code 8409 Adirondack Trl.  Austin, TX 78759		
Principal occupation / Job title (See Instructions) Management Analyst/Student		Employer (See Instructions) State of Texas
Date 10/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolff, David A.	Amount of Contribution (\$)  \$225.00
Contributor address; City; State; Zip Code 1206 W. 8th St.  Austin, TX 78701		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Drenner & Stewert
Date 10/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worob, Marc	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code 4604 W. Rim Cove  Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worob, Phyllis	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code 4604 W. Rim Cove  Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/1 Rpt: 46/66	
2 FILER NAME Gallo, Sheri		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/16/2016	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inman, Bob	8 Amount of contribution (\$) \$350.00	9 In-kind contribution description Food & beverage for event
7 Contributor address; City; State; Zip Code 3200 Riva Ridge Rd.  Austin, TX 78746		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Professor		11 Employer (FOR NON-JUDICIAL) (See instructions) University of Texas	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inman, Nancy	Amount of contribution (\$) \$350.00	In-kind contribution description Food & beverage for event
Contributor address; City; State; Zip Code 3200 Riva Ridge Rd.  Austin, TX 78746		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		Employer (FOR NON-JUDICIAL) (See instructions) NA	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# 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: 1/9 Rpt: 47/66		<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID	
<b>4</b> Date 10/21/2016		<b>5</b> Payee name Citi Mastercard			
<b>6</b> Amount (\$) \$2,401.35		<b>7</b> Payee address; City; State; Zip Code Box 6062  Sioux Falls, SD 57117			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment		<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 Itemized expenditures listed in Schedule F-4	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/27/2016		Payee name Cynol LLC			
Amount (\$) \$8,188.00		Payee address; City; State; Zip Code PO Box 17235  Galveston, TX 77552			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling 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 Poll	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/05/2016		Payee name Democracy Engine LLC			
Amount (\$) \$106.27		Payee address; City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011			
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 Website donation fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# 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: 2/9 Rpt: 48/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> Date 10/12/2016	<b>5</b> Payee name Democracy Engine LLC	
<b>6</b> Amount (\$) \$243.93	<b>7</b> Payee address; City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011	
<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 Website donation fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/19/2016	Candidate/Officeholder name Democracy Engine LLC	
Amount (\$) \$129.48	Office sought 850 Quincy Street # 402 Washington, DC 20011	
Office held		
<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 Website donation fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/26/2016	Candidate/Officeholder name Democracy Engine LLC	
Amount (\$) \$188.24	Office sought 850 Quincy Street # 402 Washington, DC 20011	
Office held		
<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 Website donation 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.

<b>1</b> Total pages Schedule F1: Sch: 3/9 Rpt: 49/66		<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID	
<b>4</b> Date 10/05/2016		<b>5</b> Payee name Democracy Engine LLC			
<b>6</b> Amount (\$) \$13.55		<b>7</b> Payee address; City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011			
<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 Website donation fees	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/28/2016		Payee name Democracy Engine LLC			
Amount (\$) \$80.57		Payee address; City; State; Zip Code 850 Quincy Street # 402 Washington, DC 20011			
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 Website donation fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/15/2016		Payee name Henning Productions			
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 2003 North Lamar Suite 200 Austin, TX 78705			
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 shoot	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# 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: 4/9 Rpt: 50/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> Date 10/21/2016	<b>5</b> Payee name Henning Productions	
<b>6</b> Amount (\$) \$400.00	<b>7</b> Payee address; City; State; Zip Code 2003 North Lamar Suite 200 Austin, TX 78705	
<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 TV ad
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/20/2016	Payee name Left Hand Design	
Amount (\$) \$974.25	Payee address; City; State; Zip Code 7233 Manchaca Rd.  Austin, TX 78745	
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 Affordability mailer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/05/2016	Payee name Malone, Ryan	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 807 Brazos Street #810 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 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.

<b>1</b> Total pages Schedule F1: Sch: 5/9 Rpt: 51/66		<b>2</b> FILER NAME Gallo, Sheri		<b>3</b> Filer ID
<b>4</b> Date 10/25/2016		<b>5</b> Payee name McKinney, Tolliver		
<b>6</b> Amount (\$) \$840.00		<b>7</b> Payee address; City; State; Zip Code 3400 Speedway # 203 Austin, TX 78705		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<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 Office work	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 10/21/2016		Payee name Paragon Printing		
Amount (\$) \$1,741.13		Payee address; City; State; Zip Code 10423 McKalla Place  Austin, TX 78758		
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing 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 Muny printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 10/26/2016		Payee name Paragon Printing		
Amount (\$) \$1,944.28		Payee address; City; State; Zip Code 10423 McKalla Place  Austin, TX 78758		
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing 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 Muny mailer #2	
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: 6/9 Rpt: 52/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> Date 10/17/2016	<b>5</b> Payee name Powell, Madison	
<b>6</b> Amount (\$) \$2,955.00	<b>7</b> Payee address; City; State; Zip Code 1903 West 32nd  Austin, TX 78703	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<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 Office work
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/25/2016	Payee name Powell, Madison	
Amount (\$) \$3,185.00	Payee address; City; State; Zip Code 1903 West 32nd  Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office work
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/20/2016	Payee name Roberson, Debbie	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 11138 Brista Way  Austin, TX 78726	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office work
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: 7/9 Rpt: 53/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> Date 10/25/2016	<b>5</b> Payee name Thomas Graphics	
<b>6</b> Amount (\$) \$7,552.00	<b>7</b> Payee address; City; State; Zip Code 9501 N. IH 35  Austin, TX 78753	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing 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 NW Hills mailing
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held
Date 10/29/2016	Payee name Thomas Graphics	
Amount (\$) \$1,797.64	Payee address; City; State; Zip Code 9501 N. IH 35  Austin, TX 78753	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing 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 Great Hills mailer
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held
Date 10/21/2016	Payee name Thomas Graphics	
Amount (\$) \$9,286.00	Payee address; City; State; Zip Code 9501 N. IH 35  Austin, TX 78753	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing 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 Affordability mailer
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: 8/9 Rpt: 54/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
<b>4</b> Date 10/25/2016	<b>5</b> Payee name Thompson, Katie Ann	
<b>6</b> Amount (\$) \$340.00	<b>7</b> Payee address; City; State; Zip Code 12700 Cloud Mountain Crossing  Austin, TX 78726	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<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 Office work
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/20/2016	Candidate/Officeholder name Thompson & Knight, LLP	
Amount (\$) \$2,650.00	Office sought 98 San Jacinto Blvd. Suite 1900 Austin, TX 78701	
Office held		
<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 Legal services
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/18/2016	Candidate/Officeholder name US Post Office Chimney Corners Station	
Amount (\$) \$43.00	Office sought 3575 Far West Blvd.  Austin, TX 78731	
Office held		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 PO Box rental
<b>9</b> 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: 9/9 Rpt: 55/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
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<b>4</b> Date 10/21/2016	<b>5</b> Payee name US Post Office Chimney Corners Station
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<b>6</b> Amount (\$) \$3,247.65	<b>7</b> Payee address; City; State; Zip Code 3575 Far West Blvd.  Austin, TX 78731
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Muny postage
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/26/2016	Payee name US Post Office Chimney Corners Station
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Amount (\$) \$3,748.83	Payee address; City; State; Zip Code 3575 Far West Blvd.  Austin, TX 78731
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Muny mailer #2 postage
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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 F4: Sch: 1/11 Rpt: 56/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/15/2016	<b>6</b> Payee name 34th St. Cafe
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<b>7</b> Amount (\$) \$43.88	<b>8</b> Payee address; City; State; Zip Code 1005 W. 34th St.  Austin, TX 78705
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/01/2016	Payee name A1 Signs
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Amount (\$) \$284.31	Payee address; City; State; Zip Code 111-B N. Bell Blvd.  Cedar Park, TX 78613
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 2/11 Rpt: 57/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 09/30/2016	<b>6</b> Payee name A1 Signs
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<b>7</b> Amount (\$) \$2,673.78	<b>8</b> Payee address; City; State; Zip Code 111-B N. Bell Blvd.  Cedar Park, TX 78613
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</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 Yardsigns & stakes
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/01/2016	Payee name Austin Terrier
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Amount (\$) \$24.35	Payee address; City; State; Zip Code 3435 Greystone  Austin, TX 78731
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meals
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 3/11 Rpt: 58/66	2 FILER NAME Gallo, Sheri	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 10/06/2016	6 Payee name Citi Mastercard
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7 Amount (\$) \$31.64	8 Payee address; City; State; Zip Code Box 6062  Sioux Falls, SD 57117
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service fee
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/01/2016	Payee name Constant Contact
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Amount (\$) \$101.27	Payee address; City; State; Zip Code Reservoir Place 1601 Trapelo Road Waltham, MA 02451
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email service
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 4/11 Rpt: 59/66	2 FILER NAME Gallo, Sheri	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 09/30/2016	6 Payee name HEB
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7 Amount (\$) \$226.01	8 Payee address; City; State; Zip Code 7025 Village Center Dr.  Austin, TX 78731
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for fundraiser
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/30/2016	Payee name Home Depot
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Amount (\$) \$51.87	Payee address; City; State; Zip Code 10515 N. Mopac Expressway  Austin, TX 78759
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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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 Signs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 5/11 Rpt: 60/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/02/2016	<b>6</b> Payee name Kneaded Pleasures
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<b>7</b> Amount (\$) \$14.44	<b>8</b> Payee address; City; State; Zip Code 3573 Far West Blvd.  Austin, TX 78731
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meals
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/30/2016	Payee name Nation Builder
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Amount (\$) \$29.00	Payee address; City; State; Zip Code 448 S. Hill Drive  Los Angeles, CA 90013
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Website
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 6/11 Rpt: 61/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/01/2016	<b>6</b> Payee name Office Depot
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<b>7</b> Amount (\$) \$62.80	<b>8</b> Payee address; City; State; Zip Code 2620 W. Anderson Ln.  Austin, TX 78757
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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<b>Date</b> 09/30/2016	<b>Payee name</b> Office Depot
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<b>Amount (\$)</b> \$318.11	<b>Payee address; City; State; Zip Code</b> 2620 W. Anderson Ln.  Austin, TX 78757
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 7/11 Rpt: 62/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 10/05/2016	<b>6</b> Payee name Office Depot
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<b>7</b> Amount (\$) \$146.12	<b>8</b> Payee address; City; State; Zip Code 2620 W. Anderson Ln.  Austin, TX 78757
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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<b>Date</b> 09/30/2016	<b>Payee name</b> Paragon Printing
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<b>Amount (\$)</b> \$2,109.01	<b>Payee address; City; State; Zip Code</b> 10423 McKalla Place  Austin, TX 78758
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 8/11 Rpt: 63/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 09/30/2016	<b>6</b> Payee name Paragon Printing
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<b>7</b> Amount (\$) \$1,155.22	<b>8</b> Payee address; City; State; Zip Code 10423 McKalla Place  Austin, TX 78758
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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<b>Date</b> 10/01/2016	<b>Payee name</b> Post Net
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<b>Amount (\$)</b> \$3.78	<b>Payee address; City; State; Zip Code</b> 3571 Far West Blvd.  Austin, TX 78731
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 9/11 Rpt: 64/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/06/2016	<b>6</b> Payee name Republican Club
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<b>7</b> Amount (\$) \$25.00	<b>8</b> Payee address; City; State; Zip Code 1609 Shoal Creek Blvd.  Austin, TX 78701
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event 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 Meeting
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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<b>Date</b> 10/01/2016	<b>Payee name</b> Shalom Austin
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<b>Amount (\$)</b> \$425.00	<b>Payee address; City; State; Zip Code</b> 4007 Madrid Cove  Austin, TX 78759
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<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 Jewish Outlook Ad
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 10/11 Rpt: 65/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/16/2016	<b>6</b> Payee name Shalom Austin
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<b>7</b> Amount (\$) \$425.00	<b>8</b> Payee address; City; State; Zip Code 4007 Madrid Cove  Austin, TX 78759
----------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</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 Jewish Outlook Ad
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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<b>Date</b> 09/30/2016	<b>Payee name</b> US Post Office Chimney Corners Station
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<b>Amount (\$)</b> \$94.00	<b>Payee address; City; State; Zip Code</b> 3575 Far West Blvd.  Austin, TX 78731
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Postage
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 11/11 Rpt: 66/66	<b>2</b> FILER NAME Gallo, Sheri	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/10/2016	<b>6</b> Payee name Vista Print
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<b>7</b> Amount (\$) \$137.34	<b>8</b> Payee address; City; State; Zip Code 95 Hayden Ave.  Lexington, MA 12451
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Thank You cards
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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