

**GENERAL-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM GPAC
COVER SHEET PG 1**

The GPAC Instruction Guide explains how to complete this form. **1** Filer ID (Ethics Commission Filers) 00081061 **2** Total pages filed: 18

3 COMMITTEE NAME
Arbor PAC

OFFICE USE ONLY
Date Received: 2016 NOV 3 3 01 PM
Date Hand-delivered or Date Postmarked: 2016 NOV 2 21
Receipt #
Date Processed
Date Imaged

AUSTIN CITY CLERK RECEIVED

4 COMMITTEE ADDRESS
 Change of Address
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
8127 Mesa Dr. #B-206
PMB 255
Austin, TX 78759

5 CAMPAIGN TREASURER NAME
MS / MRS / MR FIRST MI
Mr. Marc
NICKNAME LAST SUFFIX
Duchen

6 CAMPAIGN TREASURER STREET ADDRESS
(Residence or Business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
4711 Spicewood Springs Rd. #227
Austin, TX 78759

7 CAMPAIGN TREASURER MAILING ADDRESS
 Change of Address
STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
4711 Spicewood Springs Rd. #227
Austin, TX 78759

8 CAMPAIGN TREASURER PHONE
AREA CODE PHONE NUMBER EXTENSION
(713) 824-1266

9 REPORT TYPE
 January 15 30th day before election Dissolution (Attach PAC-DR)
 July 15 8th day before election 10th day after campaign treasurer termination
 Runoff

10 PERIOD COVERED
Month Day Year THROUGH Month Day Year
09/30/2016 THROUGH 10/29/2016

11 ELECTION
ELECTION DATE ELECTION TYPE
Month Day Year
11/08/2016
 Primary Runoff Other
 General Special

GO TO PAGE 2

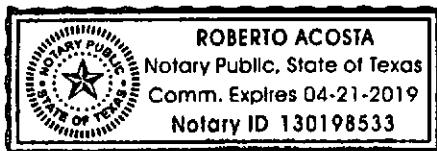
**GENERAL-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM GPAC
COVER SHEET PG 2**

| | | |
|---|--|---|
| 12 COMMITTEE NAME Arbor PAC | | 13 Filer ID (Ethics Commission Filers) 00081061 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported |
| | | B. Opposed Natalie Gauldin Austin City Council - District 7 |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold |
| 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | \$ 22,998.98 |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 21,086.28 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 3,282.70 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

16 AFFIDAVIT

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.



[Handwritten Signature]

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said MARC DUCHEN, this the 3RD day of NOVEMBER, 20 16, to certify which, witness my hand and seal of office.

Roberto Acosta
Signature of officer administering oath

ROBERTO ACOSTA
Printed name of officer administering oath

NOTARY PUBLIC
Title of officer administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

Page 3 of 18

| | | |
|---|--|---|
| 12 COMMITTEE NAME Arbor PAC | | 13 Filer ID (Ethics Commission Filers) 00081061 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Alison Alter Austin City Council - District 10 |
| | | B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Rob Walker Austin City Council - District 10 |
| | | B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported |
| | | B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | Leslie Pool Austin City Council - District 7 |
| | | |

**GENERAL-PURPOSE COMMITTEE REPORT:
PURPOSE**

**FORM GPAC
ADDENDUM**

Page 4 of 18

| | | |
|---|--|---|
| 12 COMMITTEE NAME Arbor PAC | | 13 Filer ID (Ethics Commission Filers) 00081061 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported |
| | | B. Opposed Sheri Gallo Austin City Council - District 10 |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

SUBTOTALS - GPAC

| | | |
|---------------------------------------|--------------------------------|-----------------------------------|
| 17 COMMITTEE NAME Arbor PAC | 18 Filer ID 00081061 | (Ethics Commission Filers) |
|---------------------------------------|--------------------------------|-----------------------------------|

| 19 SCHEDULE SUBTOTALS | | SUBTOTAL AMOUNT |
|------------------------------|---|------------------------|
| NAME OF SCHEDULE | | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 22,998.98 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 5. | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 6. | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 7. | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 8. | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 9. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 10. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 21,086.28 |
| 11. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 13. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 14. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 15. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/7 Rpt: 6/18 |
| 2 FILER NAME Arbor PAC | | 3 Filer ID (Ethics Commission Filers) 00081061 |
| 4 Date 10/08/2016 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arrott, Joannie 6 Contributor address; City; State; Zip Code 4605 Limestone Circle Austin, TX 78731 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) Risk Manager | | 9 Employer (See Instructions) Texas Assn. of School Boards |
| Date 10/05/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Linda Contributor address; City; State; Zip Code 4104 Turkey Creek Dr. Austin, TX 78730 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/08/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Basciano, Joyce Contributor address; City; State; Zip Code 1907 W 34th St. Austin, TX 78703 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/21/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaver, Becky Contributor address; City; State; Zip Code 816 Congress Ave. Suite 1600 Austin, TX 78701 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Self-Employed |
| Date 10/21/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunch, William Contributor address; City; State; Zip Code 1307 Oxford Ave. Austin, TX 78704 | Amount of Contribution (\$) \$225.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) SOS Alliance |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/7 Rpt: 7/18 |
| 2 FILER NAME Arbor PAC | | 3 Filer ID (Ethics Commission Filers) 00081061 |
| 4 Date 10/13/2016 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Cecilia 6 Contributor address; City; State; Zip Code 6500 Santolina Cv. Austin, TX 78731 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 10/26/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burson-Polston, Mary Contributor address; City; State; Zip Code 4107 Cat Mountain Dr. Austin, TX 78731 | Amount of Contribution (\$) \$300.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/08/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carbone, K.F. Contributor address; City; State; Zip Code 2710 West 49th 1/2 St. Austin, TX 78731 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/18/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clements, Paul Contributor address; City; State; Zip Code 2624 W. 49th St. Austin, TX 78731 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/28/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Germain, Daniel Contributor address; City; State; Zip Code 5910 Lonesome Valley Trl Austin, TX 78731 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) VP | | Employer (See Instructions) Small World Labs |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/7 Rpt: 8/18 |
| 2 FILER NAME Arbor PAC | | 3 Filer ID (Ethics Commission Filers) 00081061 |
| 4 Date 10/21/2016 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haney, Matt 6 Contributor address; City; State; Zip Code 4306 Sinclair Ave Austin, TX 78756 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions) VP | | 9 Employer (See Instructions) Harvest Rain |
| Date 10/02/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanna, Jett Contributor address; City; State; Zip Code 6112 Highlandale Austin, TX 78731 | Amount of Contribution (\$) \$9,000.00 |
| Principal occupation / Job title (See Instructions) Sr. VP | | Employer (See Instructions) Texas Lawyer's Insurance |
| Date 10/08/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hirsh, Ranleigh Contributor address; City; State; Zip Code 2624 W. 49th St. Austin, TX 78731 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/08/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahle, Mary Contributor address; City; State; Zip Code 5402 Hurlock Dr. Austin, TX 78731 | 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#: _____) King, Sterling Contributor address; City; State; Zip Code 1808 Kerr Ave. Austin, TX 78704 | Amount of Contribution (\$) \$300.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/7 Rpt: 9/18 |
| 2 FILER NAME Arbor PAC | | 3 Filer ID (Ethics Commission Filers) 00081061 |
| 4 Date 10/05/2016 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levinski, Robert 6 Contributor address; City; State; Zip Code 4200 Bridgeview Dr. Apt 1333 Fort Worth, TX 76109 | 7 Amount of Contribution (\$) \$150.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 10/17/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Fred Contributor address; City; State; Zip Code 4509 Edgemont Dr. Austin, TX 78731 | Amount of Contribution (\$) \$800.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Self |
| Date 10/23/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMurtrey, Allan Contributor address; City; State; Zip Code 2412 Greenlawn Pkwy. Austin, TX 78757 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/21/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Kirk Contributor address; City; State; Zip Code PO Box 4023 Austin, TX 78765 | Amount of Contribution (\$) \$2,000.00 |
| Principal occupation / Job title (See Instructions) Preservationist | | Employer (See Instructions) Self |
| Date 10/08/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orshalick, David Contributor address; City; State; Zip Code 2701 W. 49th 1/2 St. Austin, TX 78731 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/7 Rpt: 10/18 |
| 2 FILER NAME Arbor PAC | | 3 Filer ID (Ethics Commission Filers) 00081061 |
| 4 Date 10/08/2016 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Martha 6 Contributor address; City; State; Zip Code 3600 Hillbrook Austin, TX 78731 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 10/01/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Brad Contributor address; City; State; Zip Code 3571 Far West Blvd #58 Austin, TX 78731 | Amount of Contribution (\$) \$350.00 |
| Principal occupation / Job title (See Instructions) Research Analyst | | Employer (See Instructions) Self |
| Date 10/22/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinnelli, Joseph Contributor address; City; State; Zip Code PO Box 50038 Austin, TX 78763 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) General Contractor | | Employer (See Instructions) J Pinnelli Company LLC |
| Date 10/11/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Mary Contributor address; City; State; Zip Code 1101 Charlotte St. Austin, TX 78703 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/22/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeder, Ellen Contributor address; City; State; Zip Code 4006 Ridgelea Dr. Austin, TX 78731 | Amount of Contribution (\$) \$300.00 |
| Principal occupation / Job title (See Instructions) Paralegal | | Employer (See Instructions) Baker & Botts |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/7 Rpt: 11/18 |
| 2 FILER NAME Arbor PAC | | 3 Filer ID (Ethics Commission Filers) 00081061 |
| 4 Date 10/21/2016 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Caroline <hr/> 6 Contributor address; City; State; Zip Code 2611 West 49th St. Austin, TX 78731 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 10/21/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Joseph <hr/> Contributor address; City; State; Zip Code 2611 West 49th St. Austin, TX 78731 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/08/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanger, Mary <hr/> Contributor address; City; State; Zip Code 704 Carolyn Avenue Austin, TX 78705 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/15/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southwest Laborers District Council SWLDC PAC <hr/> Contributor address; City; State; Zip Code 11720 East 21st St. Suite D Tulsa, OK 74129 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/08/2016 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speights, Sara <hr/> Contributor address; City; State; Zip Code 2701 W. 49th 1/2 St. Austin, TX 78731 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/7 Rpt: 12/18 |
| 2 FILER NAME Arbor PAC | | 3 Filer ID (Ethics Commission Filers) 00081061 |
| 4 Date 10/04/2016 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollett, Jason <hr/> 6 Contributor address; City; State; Zip Code 3701 Bonnie Rd. Austin, TX 78703 | 7 Amount of Contribution (\$) \$300.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) Self |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|---|--|
| 1 Total pages Schedule F1: Sch: 1/6 Rpt: 13/18 | | 2 FILER NAME Arbor PAC | | 3 Filer ID (Ethics Commission Filers) 00081061 | |
| 4 Date 10/12/2016 | | 5 Payee name 1and1.com | | | |
| 6 Amount (\$) \$71.05 <input type="checkbox"/> Expenditure from corporate funds | | 7 Payee address; City; State; Zip Code 701 Lee Road Suite 300 Chesterbrook, PA 19087 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Hosting | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Alter, Alison | | Office sought Austin City Council District 10 | |
| Date 10/28/2016 | | Payee name AusTex | | | |
| Amount (\$) \$1,415.46 <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code 2431 Forbes Drive Austin, TX 78754 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print & Postage | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Alter, Alison | | Office sought Austin City Council District 10 | |
| Date | | Payee name (see previous) | | | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Walker, Rob | | Office sought Austin City Council District 10 | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|----------------------------------|--|
| 1 Total pages Schedule F1: Sch: 2/6 Rpt: 14/18 | 2 FILER NAME Arbor PAC | 3 Filer ID (Ethics Commission Filers) 00081061 |
|--|----------------------------------|--|

| | |
|-----------------------------|---------------------------------------|
| 4 Date 10/20/2016 | 5 Payee name Beatty, Leland |
|-----------------------------|---------------------------------------|

| | |
|------------------------------------|--|
| 6 Amount (\$) \$1,500.00 | 7 Payee address; City; State; Zip Code 1103 Upland Dr. Austin, TX 78741 |
|------------------------------------|--|

Expenditure from corporate funds

| | | |
|---------------------------------|---|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data |
|---------------------------------|---|--|

| | | | |
|--|-----------------------------|---------------|-------------|
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| | |
|--------------------|-------------------------------------|
| Date 10/27/2016 | Payee name CheckMark Typesetting |
|--------------------|-------------------------------------|

| | |
|---------------------------|---|
| Amount (\$) \$5,528.33 | Payee address; City; State; Zip Code 3217 N. IH 35 Austin, TX 78722 |
|---------------------------|---|

Expenditure from corporate funds

| | | |
|-------------------------------|---|--|
| 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 Design & Print |
|-------------------------------|---|--|

| | | | |
|---|--|--|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Alter, Alison | Office sought Austin City Council District 10 | Office held |
|---|--|--|-------------|

| | |
|------|------------------------------|
| Date | Payee name (see previous) |
|------|------------------------------|

| | |
|-------------|--------------------------------------|
| Amount (\$) | Payee address; City; State; Zip Code |
|-------------|--------------------------------------|

Expenditure from corporate funds

| | | |
|-------------------------------|---|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
|-------------------------------|---|--|

| | | | |
|---|---|---------------|---|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Pool, Leslie | Office sought | Office held Austin City Council District 7 |
|---|---|---------------|---|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 3/6 Rpt: 15/18 | 2 FILER NAME Arbor PAC | 3 Filer ID (Ethics Commission Filers) 00081061 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Walker, Rob | Office sought Austin City Council District 10 |
| Date 10/20/2016 | Payee name Daniel Carvalhinho, Daniel | |
| Amount (\$) \$4,000.00 | Payee address; City; State; Zip Code Rua Celso Ferraz de Camargo, 557 | |
| <input type="checkbox"/> Expenditure from corporate funds | Campinas SP 13083 Brazil | |
| 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 Websites |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Alter, Alison | Office sought Austin City Council District 10 |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Pool, Leslie | Office held Austin City Council District 7 |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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 - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: Sch: 4/6 Rpt: 16/18 | 2 FILER NAME Arbor PAC | 3 Filer ID (Ethics Commission Filers) 00081061 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Walker, Rob | Office sought Austin City Council District 10 |
| | Office held | |
| Date 10/28/2016 | Payee name Google Inc. | |
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043 | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 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 Ads |
| | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Alter, Alison | Office sought Austin City Council District 10 |
| | Office held | |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Walker, Rob | Office sought Austin City Council District 10 |
| | Office held | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: Sch: 5/6 Rpt: 17/18 | 2 FILER NAME Arbor PAC | 3 Filer ID (Ethics Commission Filers) 00081061 |
| 4 Date 10/16/2016 | 5 Payee name Herronstock.com | |
| 6 Amount (\$) \$53.04 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3428 Greystone Dr Austin, TX 78731 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Images | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Images |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 10/28/2016 | Candidate/Officeholder name SmartMail | |
| Amount (\$) \$2,033.78 <input type="checkbox"/> Expenditure from corporate funds | Office sought 2011 Anchor Ln Austin, TX 78723 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage |
| Office held Austin City Council District 10 | | |
| Date 10/28/2016 | Candidate/Officeholder name Alter, Alison | |
| Amount (\$) \$4,584.42 <input type="checkbox"/> Expenditure from corporate funds | Office sought 2011 Anchor Ln Austin, TX 78723 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage |
| Office held Austin City Council District 10 | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|----------------------------------|--|
| 1 Total pages Schedule F1: Sch: 6/6 Rpt: 18/18 | 2 FILER NAME Arbor PAC | 3 Filer ID (Ethics Commission Filers) 00081061 |
|--|----------------------------------|--|

| | |
|---------------|---------------------------------------|
| 4 Date | 5 Payee name (see previous) |
|---------------|---------------------------------------|

| | |
|---|---|
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| <input type="checkbox"/> Expenditure from corporate funds | |

| | | |
|---------------------------------|--|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
|---------------------------------|--|---|

| | | | |
|--|---|---|---|
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Pool, Leslie | Office sought Austin City Council District 7 | Office held Austin City Council District 7 |
|--|---|---|---|

| | |
|------|------------------------------|
| Date | Payee name (see previous) |
|------|------------------------------|

| | |
|---|--------------------------------------|
| Amount (\$) | Payee address; City; State; Zip Code |
| <input type="checkbox"/> Expenditure from corporate funds | |

| | | |
|------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
|------------------------|--|---|

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|---|--|--|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Walker, Rob | Office sought Austin City Council District 10 | Office held |
|---|--|--|-------------|

| | |
|--------------------|-------------------------------|
| Date 10/27/2016 | Payee name Worley Printing |
|--------------------|-------------------------------|

| | |
|---|---|
| Amount (\$) \$1,800.20 | Payee address; City; State; Zip Code 3217 N. IH 35 Austin, TX 78722 |
| <input type="checkbox"/> Expenditure from corporate funds | |

| | | |
|------------------------|--|--|
| 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 Print & Postage |
|------------------------|--|--|

| | | | |
|---|--|--|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Alter, Alison | Office sought Austin City Council District 10 | Office held |
|---|--|--|-------------|