

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: 10
3 COMMITTEE NAME Arbor PAC		OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 8127 Mesa Dr. #B-206 PMB 255 Austin, TX 78759		Date Received 2016 DEC 5 PM 5:03 AUSTIN CITY CLERK RECEIVED	
		Date Hand-delivered or Date Postmarked:	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Marc	MI MI
	NICKNAME	LAST Duchen	SUFFIX
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 <input type="checkbox"/> 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	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input checked="" type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year Month Day Year 10/30/2016 THROUGH 12/03/2016		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other 12/13/2016 <input type="checkbox"/> General <input type="checkbox"/> Special		

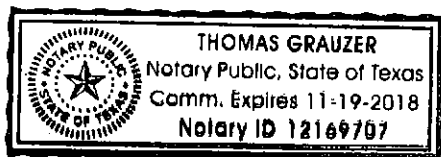
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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

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 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.)		
	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		\$	248.00
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	7,798.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	7,224.18
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	3,506.52
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.

[Signature]
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Marc Duchan, this the 5th day of December, 20 16, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

THOMAS A. GRAUER
Printed name of officer administering oath

notary public
Title of officer administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

Page 3 of 10

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**FORM GPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME Arbor PAC		18 Filer ID (Ethics Commission Filers) 00081061
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,798.00
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	\$ 7,224.18
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: 1/4 Rpt: 5/10
2 FILER NAME Arbor PAC		3 Filer ID (Ethics Commission Filers) 00081061
4 Date 11/18/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Cristina 6 Contributor address; City; State; Zip Code 5921 Mount Bonnell Rd. Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Writer		9 Employer (See Instructions) Self
Date 11/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austinites for Equity Contributor address; City; State; Zip Code 1812 Centre Creek Dr. Ste 310 Austin, TX 78754	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/2016	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 11/15/2016	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) Retired		Employer (See Instructions) Retired
Date 11/28/2016	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 (\$) \$750.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 6/10
2 FILER NAME Arbor PAC		3 Filer ID (Ethics Commission Filers) 00081061
4 Date 11/20/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaput, Armand 6 Contributor address; City; State; Zip Code 4900 Greystone Dr. Austin, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) UT
Date 11/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dealey, Amanda Contributor address; City; State; Zip Code 1115 West 7th St Unit M-1 Austin, TX 78703	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, James Contributor address; City; State; Zip Code 11405 Pradera Dr. Austin, TX 78759	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/01/2016	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 (\$) \$150.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Small World Labs
Date 11/28/2016	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 (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Sr. VP		Employer (See Instructions) Texas Lawyer's Insurance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 7/10
2 FILER NAME Arbor PAC		3 Filer ID (Ethics Commission Filers) 00081061
4 Date 11/15/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Sterling <hr/> 6 Contributor address; City; State; Zip Code 1808 Kerr Ave. Austin, TX 78704	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinnelli, Joseph <hr/> 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 11/16/2016	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 11/17/2016	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 (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinclair, Vallarie <hr/> Contributor address; City; State; Zip Code 7091 Ceberry Dr. Austin, TX 78759	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Dell

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 8/10
2 FILER NAME Arbor PAC		3 Filer ID (Ethics Commission Filers) 00081061
4 Date 11/21/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southwest Laborers District Council SWLDC PAC 6 Contributor address; City; State; Zip Code 11720 East 21st St. Suite D Tulsa, OK 74129	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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: 1/2 Rpt: 9/10	2 FILER NAME Arbor PAC	3 Filer ID (Ethics Commission Filers) 00081061
4 Date 11/02/2016	5 Payee name Google Inc.	
6 Amount (\$) \$3,050.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 Ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Alter, Alison	Office sought Austin City Council District 10
Date 12/03/2016	Payee name Paypal	
Amount (\$) \$40.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Payment Processor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 11/02/2016	Payee name SmartMail	
Amount (\$) \$2,465.71 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2011 Anchor Ln Austin, TX 78723	
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Alter, Alison	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: 2/2 Rpt: 10/10	2 FILER NAME Arbor PAC	3 Filer ID (Ethics Commission Filers) 00081061
4 Date	5 Payee name (see previous)	
6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code	
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 11/02/2016	Payee name Worley Printing	
Amount (\$) \$1,668.13 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3217 N. IH 35 Austin, TX 78722	
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 <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 (\$) <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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Walker, Rob	Office sought Austin City Council District 10