GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC **COVER SHEET PG 1**

The GPAC Instruction	Guide explains how to comple	te this form. 1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
	,	00068734	14
3 COMMITTEE NAME			OFFICE USE ONLY
Texas Vote Enviro	onment		Date Received
			ELECTRONICALLY FILED
			01/10/2017
4 COMMITTEE	ADDRESS / PO BOX; APT /	SUITE#; CITY; STATE; ZIP (CODE
ADDRESS	600 W. 28th St. #202		Date Hand-delivered or Date Postmarked
Change of Address			
Change of Address	Austin, TX 78705		Receipt # Amount
	.,		
			Date Processed
			Date Imaged
5 CAMPAIGN	MS/MRS/MR	FIRST	MI
TREASURER		David K.	
NAME			
	NICKNAME		SUFFIX
		Foster	
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE); APT / SUITE #;	CITY; STATE; ZIP CODE
TREASURER STREET	600 W. 28th St. #202		
ADDRESS			
(Residence or Business)	Austin, TX 78705		20
7 CAMPAIGN	STREET OR PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CORE
TREASURER MAILING	600 W. 28th St. #202		JAN R
ADDRESS			m ≥
Change of Address	Austin, TX 78705	••	215 101
8 CAMPAIGN	AREA CODE PHONE	NUMBER EXTENSION	
TREASURER	(512) 474-2046	ENOMBER EXTENSION	r c en
PHONE	(312) 414-2040		E E
9 REPORT	X January 15	30th day before election	Dissolution (Attach PACOR) ス
TYPE		=	7
	July 15	8th day before election	10th day after campaign treasurer termination
	L 30, 20	Runoff	
10 PERIOD	Month Day Year	Month	Day Year
COVERED	10/30/2016	THROUGH 12	/31/2016
11 ELECTION	ELECTION DATE	ELECTION :	
	Month Day Year	Primary Runoff	X Other
	12/13/2016	General Special	City of Austin elections for 11-
			8-16 AND 12-13-16.
	•	*	
		GO TO PAGE 2	
Forms provided by To	xas Ethics Commission	www.ethics.state.tx.us	Version V1.0.2916

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer	r ID (Ethics Commission File	ers)
Texas Vote Environme	ent		0000	68734	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. Jimmy Flannig	an Austin City Cou	ıncil, Dist 6, 11-8-16.	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported	·		•
		B. Opposed	·		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		· 9		
15 CONTRIBUTION TOTALS	PLEDGES, LOANS,	POLITICAL CONTRIBUTIONS (OT OR GUARANTEES OF LOANS) qualifies for the higher itemization threshol		\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	\$ 6,00	00.00		
EXPENDITURE TOTALS	3. TOTAL POLITICAL E	\$	0.00		
	4. TOTAL POLITICA	s 14,2:	13.35		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS C S PERIOD	OF THE LAST DAY	s i	B8.12
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LO REPORTING PERIOD	DANS AS OF THE	s	0.00
16 AFFIDAVIT			cludes all information i	at the accompanying report is required to be reported by me	
Nota Con	THOMAS GRAUZER ry Public, State of Texas rm. Expires 11-19-2018 ofary ID 12169707	Del	Mr. David K. Fo	and the second s	
		s	ignature of Campaign	··-·	-
	Y STAMP / SEAL ABOVE	hand tent Foske	, this the	た ^从 day	
of Jen-ag		which, witness my hand and seal of of			
Tha.	Gegu	Thomas A. Gr		stary public	_
Signature of officer a	urninistering oath	Printed name of officer administering	valii iliie	e of officer administering oath	

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 3 of 14

12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Texas Vote Environmer	nt			00068734
14 COMMITTEE	1. Candidates	A. Supported	Ms. Alison Alter Austin City Co.	uncil Dist 10 12-13-16 runoff.
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		1.0	
COMMITTEE			Mr. Canas Gray Austin City Co.	and Diet 4 11 9 15
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Casar Greg Austin City Co.	Jrigi Dist 4, 11-8-16.
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by pany.)	A. Supported	Ms. Delia Garza Austin City Co	uncil Dist 2 11-8-16.
(Attach lists on plain paper to complete this report if necessary.)	:	B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)			· · · · · · · · · · · · · · · · · · ·

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC

Page 4 of 14

12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Vote Environmer	nt				00068734	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ms. Leslie Pool	Austin City Cou	ncil Dist 7 11-8	-16.
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported	1			
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	j	****		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	- ,			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported	Ballot ID:Prop 1 bonds 11-8-16.	Election Date: C	Desc:City of Aus	stin Prop 1, transportation
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

SUBTOTALS - GPAC

FORM GPAC **COVER SHEET PG 3**

			5 of 14
17 COMMITTI Texas Vo	EE NAME de Environment	18 Filer ID 00068734	(Ethics Commission Fiters)
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 6,000.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	•	\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (DRGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 14,213.35
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1
The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 6/14
2 FILER NAME Texas Vote (Environment		3 Filer ID (Ethics Commission Filers) 00068734
4 Date 11/18/2016	5 Full name of contributor out-of-state PAC (ID#:_ Austinites for Equity 6 Contributor address; City; State; Zip Code 1812 Centre Creek Drive Suite 310 Austin, TX 78754		7 Amount of Contribution (\$) \$1,000.00
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
Date 11/22/2016	Full name of contributor out-of-state PAC (ID#:_Kirk, Mitchell (Mr.) Contributor address; City; State; Zip Code 304 E 32nd St Austin, TX 78705		Amount of Contribution (\$) \$5,000.00
Principal occu Securities In	upation / Job title (See Instructions)	Employer (See Instructions Self	s)

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District

Contributions	y Conations Made By Mofficeholder/Politica Payment	- I Committee	Gift/Awards/Memorials Expe Legal Services		Expense	e /Contract Labor	Travel Out of Dis OTHER (enter a	trict category not listed above)
0.000.00	- aymen		The Instruction Guide	explains how to co	omple	te this form.		
1 Total pages	s Schedule F1:	2 FILER NAM	E			_	3 Filer ID	(Ethics Commission Filers)
	Rpt: 7/14		e Environment				00068734	
4 Date		5 Payee name	<u> </u>					
12/07/201	.6	Bean, Sam	iuel (Mr.)					
6 Amount (\$)		7 Payee addr	ess; City;	State; Zip C	ode			
	\$156.00	2604 Para	mount Ave					
Expenditur corporate (Austin, TX	78704					
8 PURPO	DSE	(a) Category	See Categories listed at the to	p of this schedule)	(b)	Description		
OF EXPENDI		Consulting		,			outside of Texas. Comp	
EXPENDI	ITORE				1	_	TX, officeholder living	expense
						Get out the vo	ote effort	
							-	
	ONLY if direct		ficeholder name	Office so	ught		Office he	ld
expenditure	e to benefit C/O	7						
Date		Payee name						
10/31/201	.6	Chase Bar						
Amount (\$)	\	Payee addr	ess; City;	State; Zip C	ode			-
Amount (4)	\$10.00 ·	1904 Guad	•	Oldic, Zip O	ouc			
	\$10.00	1304 Gda(alupe St					
Expenditur								
corporate t	funds	Austin, TX	78705					
PURPO		(a) Category (See Categories listed at the to	p of this schedule)	(p)	Description		
EXPEND		Accounting	J/Banking			□	outside of Texas. Comp	
						Bank fees	TX, officeholder living	expense
						Daik iccs		
Olete (0411 V 16 di	Condidate (Of	Earling and a	Office	bt		Office he	ld.
	<u>ONLY</u> if direct e to benefit C/OI		ficeholder name	Office so	ugnt		Office he	ela .
•	. = . = .							
Date		Payee name	;					
11/30/201	16	Chase Bar	ı k					•
Amount (\$))	Payee addr	ess; City;	State; Zip C	ode	-		
	\$10.00	1904 Guad	lalupe St					
Expenditur corporate f		Austin, TX	78705					
PURPO					I/b)	Description		. <u> </u>
OF			See Categories listed at the to	p of this schedule)	167	Description Check if travel o	utside of Texas. Comp	olete Schedule T
EXPENDI	TURE	Accounting	/Banking			□	TX, officeholder living	
1						Bank fees		•
					1			
Complete C	ONLY if direct	Candidate/Of	ficeholder name	Office so	uaht		Office he	ld
	e to benefit C/O		.ss.toles halls	J 301	-9."		3,1100 110	· -
								_

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Legal Services The Instruction Gui		_	s/Contract Labor		OTHER (enter a	strict a category not listed abor	ve)
1 Total pages Schedule F1:	I2 EII ER NAM			<u></u> -	7	Įą	Filer ID	(Ethics Commissio	n Filers)
Sch: 2/7 Rpt: 8/14		Environment					00068734	(Euros Commes.c	111 11015)
4 Date	5 Payee name					_			
12/31/2016	Chase Ban				•				
6 Amount (\$)	7 Payee addre	ess; City;	State; Zip (Code					
\$10.00	1904 Guad	•	ound, e.p.	<i>></i> 0.40					
									
Expenditure from corporate funds	Austin, TX								
8 PURPOSE OF		See Categories listed at the	e top of this schedule)	(b)	Description		·· · a	*	
EXPENDITURE	Accounting	/Banking					ide of Texas. Com , officeholder living	nplete Schedule T. n expense	
					Bank fees	1, 1154	Onicenoaci av	3 exheriac	
Complete ONLY if direct expenditure to benefit C/Oh		iceholder name	Office so	 ought			Office h	eld	
Date	Payee name								÷
11/29/2016	Clean Wate	er Action							
Amount (\$)	Payee addre	ess; City;	State; Zip (Code					
\$2,500.00	600 W. 28tl	n St							
	Suite 202								
Expenditure from corporate funds	Austin, TX	78705							. "
PURPOSE OF	1	See Categories listed at the		(b)	Description				
EXPENDITURE	Office Over	head/Rental Exp	ense		—		ide of Texas. Com , officeholder living	nplete Schedule T. a expense	
!	1				Canvassing a				
!					- Con 17 Con 17 Con 18	A1	p.10.10	id.ia	
Complete <u>ONLY</u> if direct expenditure to benefit C/O		iceholder name	Office se	 ought			Office h	eld	
Date	Payee name								
11/18/2016	Clean Wate	r Action							
Amount (\$)	Payee addre	ess; City;	State: Zip 0	Code					
\$1,600.00	600 W. 28t	n Street							
	Suite 202								
Expenditure from corporate funds	Austin, TX	78705							
PURPOSE	(a) Category (5	iee Categories listed at the	re ton of this schedule)	Т(ь)	Description			<u> </u>	<u> </u>
OF EXPENDED DE		head/Rental Exp			Check if travel				
EXPENDITURE	1				_		, officeholder living		
					Canvassing,	pho	one banks, e	emails	
	<u> </u>								
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		iceholder name	Office so	ought			Office he	el d	
						_			
					•				

SCHEDULE F1

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

Event Expense Lo
Fees Oi
Food/Beverage Expense Po
Gitt/Awards/Memorials Expense Pr

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide ex	Salaries/M	/ages	Contract Labor		OTHER (enter a		sted above)	
1 Total pages Schedule F1: Sch: 3/7 Rpt: 9/14		E Environment				3	Filer ID 00068734	(Ethics Cor	nmission File	ers)
4 Date 11/15/2016 6 Amount (\$) \$4,600.00	5 Payee name Clean Wat 7 Payee addre 600 W. 28	er Action ess; City;	State; Zip Co	đe						
Expenditure from corporate funds	Suite 202 Austin, TX	78705							_	
8 PURPOSE OF EXPENDITURE		See Categories listed at the top or rhead/Rental Expense		(b)	느	, TX	ide of Texas. Com , officeholder living one banking	expense	т.	
Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office sou	ght		•	Office h	eld		
Date 12/14/2016	Payee name Clean Wat									
Amount (\$) \$1,500.00 Expenditure from corporate funds	Payee addr 600 West : Suite 202 Austin, TX	28th Street	State; Zip Co	de	ধ					
PURPOSE OF EXPENDITURE		Sce Categories listed at the top or rhead/Rental Expense		(b)		, тх	ide of Texas. Cam , officehalder living e efforts		т.	
Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office sou	ght			Office he	eld		
Date 12/21/2016	Payee name Clean Wat	_			··	-				
Amount (\$) \$1,000.00 Expenditure from corporate funds	Payee addr 600 West a Suite 202 Austin, TX	28th Street	State; Zip Co	de						
PURPOSE OF EXPENDITURE		See Categories listed at the top o rhead/Rental Expense		(b)	느		ide of Texas. Com , officeholder living		т.	
Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ght			Office he	eld		
										•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officehokler/Politica Credit Card Payment	d Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ns how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1 Total pages Schedule F1:	•	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)	
Sch: 4/7 Rpt: 10/14	Texas Vote Environment		00068734	
4 Date 11/08/2016	5 Payee name DeBocat, Kendall (Ms.)			
6 Amount (\$) \$104.00 Expenditure from corporate funds 8 PURPOSE OF EXPENDITURE	7 Payee address; City; Sta 4520 Speedway Apt A Austin, TX 78751 (a) Category (See Categories listed at the top of this Consulting Expense	Check if travel or	utside of Texas. Complete Schedule T. TX, officeholder living expense te effort	
Complete ONLY if direct expenditure to benefit C/Oi	Candidate/Officeholder name	Office sought	Office held	
Date	Payros name			
	Payee name Foster, David (Mr.)			
11/01/2016				
Amount (\$) \$121.22	Payee address; City; Sta 1902 Forestglade Drive	ate; Zip Code		
Expenditure from corporate funds	Austin, TX 78745			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel or Check if Austin, 1	uiside of Texas. Complete Schedule T. TX, officeholder living expense nt for election day expenses.	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held	
Date	Рауее пате		<u></u>	
12/14/2016	Foster, David (Mr.)			
Amount (\$) \$44.65	Payee address; City; Sta 1902 Forestglade Drive	ate; Zip Code	_	
Expenditure from corporate funds	Austin, TX 78745			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if Iravel or Check if Austin, 1	utside of Texas. Complete Schedule T. TX, officeholder living expense nt for expenses.	
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name	Office sought	Office held	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee	Cit/Awards/Memorals Expense Legal Services The Instruction Guide ex	Salaries/V	Vages	Contract Labor		OTHER (enter a	strict category not listed above)	
1. Tatal asses Cabadala St.	O FUED NAME		<u> </u>	<u> </u>		3	Filer ID	(Ethics Commission Filer	
1 Total pages Schedule F1: Sch: 5/7 Rpt: 11/14		= Environment				3	00068734	(Ethics Commission File)	3)
4 Date	5 Payee name								
11/08/2016	ľ	Benjamin (Mr.)							
6 Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	de	·-				
\$104.00	2001 E 10t	h St							
Expenditure from corporate funds	Austin, TX	78702							
8 PURPOSE	(a) Category (s	iee Categorics listed at the top of	this schedule)	(b)	Description				
OF EXPENDITURE	Consulting	Expense			<u></u>		ide of Texas. Com	•	
					Get out the ve		, officeholder living	g expense	
					Get out the vi	VIC	CIIUIIS		
·	<u> </u>								
9 Complete ONLY if direct expenditure to benefit C/OI		īceholder name	Office sou	ght			Office he	eld	
Date	Payee name								
11/08/2016	Hart, Alexa								
Amount (\$)	Payee addre		State; Zip Co	de					
` '	· ·		State, Zip Co	iue.					
\$104.00	4520 Spee	uway					•		
Expenditure from	Apt A								
corporate funds	Austin, TX	78751							
PURPOSE	(a) Category (s	ee Categories listed at the top of	(this schedule)	(b)	Description				
OF	Consulting				Check if travel	ziuo	ide of Texas. Com	plete Schedule T.	
EXPENDITURE	1	•			—		, afficeholder living	expense	
					Get out the ve	ote	effort		
Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ght			Office h	eld	
Date	Payee name					_			
11/08/2016	Huang, lan								
	-	<u> </u>	Ctata: Zia Ca						
Amount (\$)	Payee addre		State; Zip Co	iue					
\$91.00	3110 West	Ave Austin							
Expenditure from corporate funds	Austin, TX	78705							
PURPOSE	(a) Category is	ee Categories listed at the top of	this schedule)	(b)	Description		· · · · · ·	•	
OF	Consulting					outs	ide of Texas. Com	plete Schedule T.	
EXPENDITURE		— ,			Check if Austin	, TX	, officeholder living	expense	
	1				Get out the ve	ote	efforts		
	ĺ								
Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ght			Office h	eld	
expenditure to benefit C/O				-					
		-							

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donati

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credil Card Payment		egal Services The Instruction Guide e	ervices Salaries/Wages/Contract Labor OT istruction Guide explains how to complete this form.				OTHER (enter a	THER (enter a category not listed above)		
1 Total pages Schedule F1:	2 FILER NAME				,	3	Filer ID	(Ethics Commission Filers)		
Sch: 6/7 Rpt: 12/14	Texas Vote E	nvironment					00068734			
4 Date	5 Payee name									
11/01/2016	McNalty, Stu	art (Mr.)								
6 Amount (\$) \$39.00	7 Payee address 1402 E 34th	s; City;	State; Zip Co	ode						
Expenditure from corporate funds	Austin, TX 78	1722								
8 PURPOSE		Categories listed at the top	of this schedule)	(b)	Description					
OF EXPENDITURE	Consulting E	kpense				ı, TX,	officeholder living	plete Schedule T. g expense	•	
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Office	eholder name	Office sou	ught			Office he	eld		
Date	Payee name									
11/08/2016	Prus, Jacek	(Mr.)								
Amount (\$) \$104.00	Payee address 2609 Salado	s; City;	State; Zip Co	ode						
Expenditure from corporate funds	Austin, TX 78	3705			-					
PURPOSE OF EXPENDITURE	(a) Category (See Consulting E	Categories listed at the top xpense	of this schedule)	(b)		ı, TX,	officeholder living	plete Schedule T. g expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Office	eholder name	Office sou	ıght			Office he	eld		
Date	Рауее пате									
11/18/2016	Worley Printi	ng								
Amount (\$)	Payee address	; City;	State; Zip Co	ode						
\$257.64	3217 North II	1 35								
Expenditure from corporate funds	Austin, TX 78	3722								
PURPOSE OF		Categories listed at the top	of this schedule)	(b)	Description					
EXPENDITURE	Printing Expe	nse			=		de of Texas. Com officeholder living	plete Schedule T.		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Office	holder name .	Office sou	ught			Office he	eld		

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Domaitine Made By Conditate/Officeholde/Political Committee

Event Expense
Fees
Food/Beverage Expense
Git/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Political Credit Card Payment		Legal Services The Instruction Guide ex		Wages/Contract Labor omplete this form.		OTHER (enter a	category not listed above)
1 Total pages Schedule F1:	2 FILER NAM	Ē.	,		3	Filer ID	(Ethics Commission Filers)
Sch: 7/7 Rpt: 13/14		e Environment	1			00068734	
4 Date	5 Payee name				_		
12/01/2016	Worley Prin	iting					
6 Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode			
\$461.99	3217 North	IH 35					
Expenditure from corporate funds	Austin, TX			_			,
8 PURPOSE OF		See Categories listed at the top of	of this schedule)	(b) Description			<u>-</u>
OF EXPENDITURE	Printing Exp	pense	!			ide of Texas. Comp , officeholder living	
	1		ļ			iling postcard	
				<u> </u>			
9 Complete ONLY if direct expenditure to benefit C/OH		ficeholder name	Office sou	.ight		Office he	eld
Date	Payee name	:					
11/01/2016	Worley Prin	ıting					
Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode			
\$1,395.85	3217 North	. IH 35					
Expenditure from corporate funds	Austin, TX	78722					
PURPOSE	(a) Category (5	See Categories listed at the top o	of this schedule)	(b) Description			
OF EXPENDITURE	Printing Exp		!			ide of Texas. Comp	
			!	Campaign		, officeholder living	j expense
			!	Campaig	l Fiyer.	S	
Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office sou	ught		Office he	eld
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