

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID		2 Total pages filed: 21	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Alison		<b>OFFICE USE ONLY</b> Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged		
	NICKNAME LAST SUFFIX Alter				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 4401 Bellvue Ave Austin, TX 78756		Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI August W		<b>OFFICE USE ONLY</b> Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged		
	NICKNAME LAST SUFFIX Happy Harris III				
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1901 West 35th Street Austin TX 78703				
7 CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 320-8808	EXTENSION		
8 REPORT TYPE	<input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year    Month Day Year 12/04/2016    THROUGH    12/31/2016				
10 ELECTION	ELECTION DATE Month Day Year 12/13/2016		ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 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

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<b>13 C / OH NAME</b> Alter, Alison		<b>14 Filer ID</b>	
<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b> <input type="checkbox"/> Additional Pages	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.		
	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>	
	<input type="checkbox"/> GENERAL	Austinites for Equity	
	<input checked="" type="checkbox"/> SPECIFIC	<b>COMMITTEE ADDRESS</b>	
		1812 Centre Creek Dr Suite 310	
		Austin, TX 78754	
	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>		
	Kirkman, Jack		
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>		
	15408 Interlachen Drive		
	Austin, TX 78758		
<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)	\$ 6,290.00
<b>EXPENDITURE TOTALS</b>	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 91,912.03
<b>CONTRIBUTION BALANCE</b>	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,175.79
<b>OUTSTANDING LOAN TOTALS</b>	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,500.00

## 17 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.

*Alison B. Alter*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Alison Alter, this the 17<sup>th</sup> day of January, 2017, to certify which, witness my hand and seal of office.

*[Signature]*  
Signature of officer administering

Susan Harry  
Printed name of officer administering

Notary  
Title of officer administering

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

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<b>18 FILER NAME</b> Alter, Alison		<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,290.00
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 E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 84,359.85
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 7,500.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 52.18
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: 1/9 Rpt: 4/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/05/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashworth, Karen <hr/> <b>6</b> Contributor address; City; State; Zip Code 4202 Tallowood Dr  Austin, TX 78731	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Saunders Norval Pargaman & Atkins
<b>Date</b> 12/09/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Environmental Democrats <hr/> <b>Contributor address; City; State; Zip Code</b> 604 West 11th St.  Austin, TX 78701	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/07/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Barkley, John <hr/> <b>Contributor address; City; State; Zip Code</b> 3118 Wheeler  Austin, TX 78705	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> real estate		<b>Employer (See Instructions)</b> self
<b>Date</b> 12/09/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonilla, Eric <hr/> <b>Contributor address; City; State; Zip Code</b> 803 Dawson  Austin, TX 78704	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Analyst		<b>Employer (See Instructions)</b>
<b>Date</b> 12/09/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Bornstein, Sue <hr/> <b>Contributor address; City; State; Zip Code</b> 3111 Beverly Dr.  Dallas, TX 75205	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Texas Medical Home Initiative		<b>Employer (See Instructions)</b> Executive Director

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/9 Rpt: 5/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/06/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Sabrina <hr/> <b>6</b> Contributor address; City; State; Zip Code 1900 W 40th St  Austin, TX 78731	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Marketing		<b>9</b> Employer (See Instructions) Dell
<b>Date</b> 12/09/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Eaton, David <hr/> <b>Contributor address; City; State; Zip Code</b> 3702 Hidden Hollow  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Professor		<b>Employer (See Instructions)</b> University of Texas
<b>Date</b> 12/13/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Ekerdt, Carol <hr/> <b>Contributor address; City; State; Zip Code</b> 7432 Anaqua Dr.  Austin, TX 78750	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> none
<b>Date</b> 12/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott Naishtat Campaign <hr/> <b>Contributor address; City; State; Zip Code</b> 6401 Wilbur Dr.  Austin, TX 78757	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/14/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Erwin, Gay <hr/> <b>Contributor address; City; State; Zip Code</b> Barton Oaks Plaza One 901 S. MoPac Expressway, Suite 100 Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b> Consultant		<b>Employer (See Instructions)</b> Strategic Partnerships Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/9 Rpt: 6/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/04/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Folberg, Steven <hr/> <b>6</b> Contributor address; City; State; Zip Code 4516 Sinclair Avenue  Austin, TX 78756	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Rabbi		<b>9</b> Employer (See Instructions) Congregation Beth Israel
<b>Date</b> 12/07/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Forbath, Willy <hr/> <b>Contributor address; City; State; Zip Code</b> 3206 Greenlee Dr.  Austin, TX 78703	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Professor		<b>Employer (See Instructions)</b> The University of Texas
<b>Date</b> 12/09/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert, Lizan <hr/> <b>Contributor address; City; State; Zip Code</b> 4212 Bellvue Ave  Austin, TX 78756	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> Engineer		<b>Employer (See Instructions)</b> Guy F. Atkinson Construction
<b>Date</b> 12/07/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Haddad, Michelle <hr/> <b>Contributor address; City; State; Zip Code</b> 4707 Highland Terrace  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Teacher		<b>Employer (See Instructions)</b>
<b>Date</b> 12/04/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardin, Kathy <hr/> <b>Contributor address; City; State; Zip Code</b> 9501 Rolling Oaks Trail  Austin, TX 78750	<b>Amount of Contribution (\$)</b>  \$20.00
<b>Principal occupation / Job title (See Instructions)</b> Engineer		<b>Employer (See Instructions)</b> Travis County

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/9 Rpt: 7/21
2 FILER NAME Alter, Alison		3 Filer ID
4 Date 12/08/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Eric	7 Amount of Contribution (\$)  \$100.00
	6 Contributor address; City; State; Zip Code 2114 Indian Trail  Austin, TX 78703	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/04/2016	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00027342) IBEW PAC Voluntary Fund	Amount of Contribution (\$)  \$350.00
	Contributor address; City; State; Zip Code 900 Seventh Street, N.W.  Washington, DC 20001	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Jennifer	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code 7705 Waldon Dr.  Austin, TX 78750	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 12/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keene, Russell	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code 2600 Maria Anna Rd  Austin, TX 78703	
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) Crossnore Group LLC
Date 12/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Zuhair	Amount of Contribution (\$)  \$50.00
	Contributor address; City; State; Zip Code 1904 Spruce Street 3F Philadelphia, PA 19103	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) MBA

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/9 Rpt: 8/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/05/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehman, Chris <hr/> <b>6</b> Contributor address; City; State; Zip Code 1914 Larchmont Dr.  Austin, TX 78704	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>8</b> Principal occupation / Job title (See Instructions) Appraiser		<b>9</b> Employer (See Instructions) Self
<b>Date</b> 12/13/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Kevin <hr/> <b>Contributor address; City; State; Zip Code</b> 1002 Bouldin Ave.  Austin, TX 78704	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Buyer		<b>Employer (See Instructions)</b> Whole Earth Provision Co.
<b>Date</b> 12/07/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lomas, Rachel <hr/> <b>Contributor address; City; State; Zip Code</b> 212 West 33rd St  Austin, TX 78705	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Chef		<b>Employer (See Instructions)</b> Entrepreneur
<b>Date</b> 12/05/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahler, Barbara <hr/> <b>Contributor address; City; State; Zip Code</b> 4502 Avenue G  Austin, TX 78751	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Hydrologist		<b>Employer (See Instructions)</b>
<b>Date</b> 12/12/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcus, Richard <hr/> <b>Contributor address; City; State; Zip Code</b> 913 Terrace Mountain Drive  Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> Senior Advisor		<b>Employer (See Instructions)</b> Peter J Solomon Company



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/9 Rpt: 9/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/08/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathis, Mary Nell <hr/> <b>6</b> Contributor address; City; State; Zip Code 6300 Mercedes Bend  Austin, TX 78759	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 12/05/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Phil & Sue <hr/> <b>Contributor address; City; State; Zip Code</b> 2703 Stratford Drive  Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 12/04/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Meltzer, Linda <hr/> <b>Contributor address; City; State; Zip Code</b> 6334 Yaupon Drive  Austin, TX 78759	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> lawyer		<b>Employer (See Instructions)</b> TPCIGA
<b>Date</b> 12/04/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Midwest Region Laborers' PAC <hr/> <b>Contributor address; City; State; Zip Code</b> 1 N. Old State Capitol Plaza Ste. 525 Springfield, IL 62701	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/04/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Hillary <hr/> <b>Contributor address; City; State; Zip Code</b> 6012 Marquesa Dr.  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: 7/9 Rpt: 10/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/13/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, James <hr/> <b>6</b> Contributor address; City; State; Zip Code 6807 W. Courtyard Dr.  Austin, TX 78730-5015	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>8</b> Principal occupation / Job title (See Instructions) Semi retired tax consultant		<b>9</b> Employer (See Instructions) self
<b>Date</b> 12/14/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Nabers, Mary Scott <hr/> <b>Contributor address; City; State; Zip Code</b> 901 S Mopac Bldg I #100  Austin, TX 78746	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b> President/CEO		<b>Employer (See Instructions)</b> Strategic Partnerships, Inc.
<b>Date</b> 12/04/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, Howard <hr/> <b>Contributor address; City; State; Zip Code</b> 4610 Horseshoe Bnd  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 12/13/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Neely, Mary Ann <hr/> <b>Contributor address; City; State; Zip Code</b> 1908 Barton Pky  Austin, TX 78704	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> None
<b>Date</b> 12/06/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Newberry, Diane <hr/> <b>Contributor address; City; State; Zip Code</b> 3801 Green Trl N  Austin, TX 78731	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Administrative Assistant		<b>Employer (See Instructions)</b> AISD - Anderson HS

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/9 Rpt: 11/21
<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/05/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivers, Richel <hr/> <b>6</b> Contributor address; City; State; Zip Code 1209 W 5th St., Suite 200  Austin, TX 78703	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Rivers McNamara, PLLC
Date 12/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolke, Paul <hr/> Contributor address; City; State; Zip Code 812 Edgecliff Ter.  Austin, TX 78704	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) AFCU		Employer (See Instructions)
Date 12/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, David <hr/> Contributor address; City; State; Zip Code 5901 Lonesome Valley Trail  Austin, TX 78731	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) self
Date 12/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stowell, Albert <hr/> Contributor address; City; State; Zip Code 6303 Mercedes Bend  Austin, TX 78749	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Retired 5466		Employer (See Instructions) none
Date 12/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Phil, & Carol Stall <hr/> Contributor address; City; State; Zip Code 68 Mildred St.  Austin, TX 78702	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Historian		Employer (See Instructions) City of Austin

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/9 Rpt: 12/21
2 FILER NAME Alter, Alison		3 Filer ID
4 Date 12/04/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Dianna 6 Contributor address; City; State; Zip Code 3621 Claburn Dr Austin, TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired Certified Tumor Registrar		9 Employer (See Instructions) Texas State Health Services
Date 12/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Sharon Contributor address; City; State; Zip Code 4416 Ramsey Austin, TX 78756	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Service		Employer (See Instructions) Zenith Cafe Corp.
Date 12/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitley, Suzanne Contributor address; City; State; Zip Code 5348 Magdalena Dr Austin, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 12/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggins, Lynne Contributor address; City; State; Zip Code 3310 Bridle Path Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney, Financial Advisor		Employer (See Instructions) Integrated Wealth Strategies
Date 12/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zarrabi, Azadeh Contributor address; City; State; Zip Code 6611 Argentia Rd Austin, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Lawyer		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.

<b>1</b> Total pages Schedule F1: Sch: 1/7 Rpt: 13/21		<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/12/2016		<b>5</b> Payee name Atkins, Jesse		
<b>6</b> Amount (\$) \$132.00		<b>7</b> Payee address; City; State; Zip Code 1914 Patton Ln  Austin, TX 78723		
<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 Contract labor		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 12/12/2016		Payee name Austin Chronicle		
Amount (\$) \$1,545.00		Payee address; City; State; Zip Code PO Box 4189  Austin, TX 78765		
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 Political print advertising		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 12/13/2016		Payee name Austin's Pizza		
Amount (\$) \$156.25		Payee address; City; State; Zip Code 1600 W 35th St  Austin, TX 78731		
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 food for volunteers		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/7 Rpt: 14/21		<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/31/2016		<b>5</b> Payee name DonateWay		
<b>6</b> Amount (\$) \$231.36		<b>7</b> Payee address; City; State; Zip Code P.O. Box 301267  Austin, TX 78703		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees  <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 merchant account processing fees for reporting period		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name  Office sought  Office held		
Date 12/13/2016		Payee name Eastside Pies		
Amount (\$) \$96.87		Payee address; City; State; Zip Code 5312 Airport Blvd.  Austin, TX 78751		
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 food for volunteers		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name  Office sought  Office held		
Date 12/07/2016		Payee name Facebook		
Amount (\$) \$1,293.14		Payee address; City; State; Zip Code 1601 S. California Ave.  Palo Alto, CA 94304		
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 Political online advertising		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name  Office sought  Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/7 Rpt: 15/21		2 FILER NAME Alter, Alison		3 Filer ID
4 Date 12/13/2016		5 Payee name Facebook		
6 Amount (\$) \$2,457.14		7 Payee address; City; State; Zip Code 1601 S. California Ave.  Palo Alto, CA 94304		
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 Political online advertising		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name  Office sought  Office held		
Date 12/12/2016		Payee name HEB		
Amount (\$) \$29.65		Payee address; City; State; Zip Code 1801 E 51st St  Austin, TX 78723		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 volunteers		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name  Office sought  Office held		
Date 12/15/2016		Payee name Kruehmke, Max		
Amount (\$) \$450.00		Payee address; City; State; Zip Code 4804 Blueberry Tr.  Austin, TX 78723		
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 video		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name  Office sought  Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/7 Rpt: 16/21	<b>2</b> FILER NAME Alter, Alison	<b>3</b> Filer ID
<b>4</b> Date 12/10/2016	<b>5</b> Payee name Postmaster	
<b>6</b> Amount (\$) \$952.00	<b>7</b> Payee address; City; State; Zip Code 8225 Cross Park Dr,  Austin, TX 78710	
<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 Postage
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/06/2016	Payee name Rindy Miller Media	
Amount (\$) \$9,800.00	Payee address; City; State; Zip Code 2401 E 6th St  Austin, TX 78702	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing, postage & mailing services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/12/2016	Payee name Sheldon, Tyler	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 8718 Coastal Dr.  Austin, TX 78749	
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 Contract labor
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: 5/7 Rpt: 17/21		<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/14/2016		<b>5</b> Payee name Smith, Christian		
<b>6</b> Amount (\$) \$3,000.00		<b>7</b> Payee address; City; State; Zip Code 4612 Caswell Ave #B  Austin, TX 78751		
<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 Contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 12/07/2016		Payee name Staples		
Amount (\$) \$141.00		Payee address; City; State; Zip Code 1201 Barbara Jordan Blvd  Austin, TX 78723		
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 12/13/2016		Payee name Staples		
Amount (\$) \$47.61		Payee address; City; State; Zip Code 1201 Barbara Jordan Blvd  Austin, TX 78723		
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 office supplies
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: 6/7 Rpt: 18/21		<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> Date 12/31/2016		<b>5</b> Payee name University Federal Credit Union		
<b>6</b> Amount (\$) \$0.20		<b>7</b> Payee address; City; State; Zip Code 4611 Guadalupe St  Austin, TX 78751		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<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 bank fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 12/12/2016		Payee name Winning Connections		
Amount (\$) \$2,217.38		Payee address; City; State; Zip Code 317 Pennsylvania Ave SE # 2  Washington, DC 20003		
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 Phone advertising services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 12/14/2016		Payee name Worley Printing		
Amount (\$) \$1,584.79		Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd  Austin, TX 78722		
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 printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/7 Rpt: 19/21		2 FILER NAME Alter, Alison		3 Filer ID	
4 Date 12/12/2016		5 Payee name Worley Printing			
6 Amount (\$) \$503.36		7 Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd  Austin, TX 78722			
8 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 printing	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/21/2016		Payee name Y Strategy			
Amount (\$) \$23,866.13		Payee address; City; State; Zip Code 3110 Manor Rd  Austin, TX 78723			
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 Phone calls, field services, printing, office supplies, graphic design, online advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/12/2016		Payee name Y Strategy			
Amount (\$) \$32,855.97		Payee address; City; State; Zip Code 3110 Manor Rd  Austin, TX 78723			
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 Field services, phone calls, online adv., office supplies, graphic design, consulting, printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

## 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 F2: Sch: 1/1 Rpt: 20/21		<b>2</b> FILER NAME Alter, Alison		<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS				\$
<b>5</b> Date 12/14/2016		<b>6</b> Payee name Y Strategy		
<b>7</b> Amount (\$) \$7,500.00		<b>8</b> Payee address; City; State; Zip Code 3110 Manor Rd  Austin, TX 78723		
<b>9</b> TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		
<b>10</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name		Office sought		Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

## 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 G: Sch: 1/1 Rpt: 21/21	<b>2</b> FILER NAME Alter, Alison	<b>3</b> Filer ID
<b>4</b> Date 12/12/2016	<b>5</b> Payee name P Terry's	
<b>6</b> Amount (\$) \$52.18  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 3303 N Lamar Blvd  Austin, TX 78705	
<b>8</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 food for volunteers
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held