

# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC  
COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 23
3 COMMITTEE NAME Our City Our Safety Our Choice PAC			<b>OFFICE USE ONLY</b> Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 6193  Austin, TX 78762		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Joseph NICKNAME LAST SUFFIX Pinnelli		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1507 W. 6th Austin, TX 78703		
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 Limit <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year 07/01/2016 THROUGH 12/31/2016		
11 ELECTION	ELECTION DATE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Runoff <input type="checkbox"/> Special <input type="checkbox"/> Other		

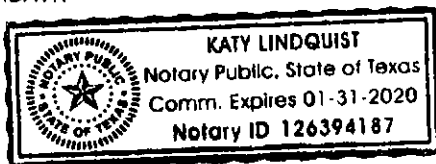
GO TO PAGE 2

# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Our City Our Safety Our Choice PAC		<b>13 Filer ID</b>	
<b>14 COMMITTEE PURPOSE</b>  (Attach lists on plain paper to complete this report if necessary.)  <input type="checkbox"/> SUPPORT (Candidate or Measure) <input checked="" type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate  <input type="checkbox"/> Officeholder	<b>CANDIDATE / OFFICEHOLDER NAME</b>	
		<b>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</b>	
	<input checked="" type="checkbox"/> Measure	<b>BALLOT IDENTIFICATION / #</b>	
		<b>ELECTION DATE</b> Month    Day    Year 05/07/2016	
		<b>DESCRIPTION</b> Regarding repeal of City of Austin's safety requirements on TNC	
<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED</b>		\$ 20.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>		\$ 9,460.74
<b>EXPENDITURE TOTALS</b>	<b>3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED</b>		\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>		\$ 5,574.60
<b>CONTRIBUTION BALANCE</b>	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>		\$ 5,099.09
<b>OUTSTANDING LOAN TOTALS</b>	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>		\$ 18,000.00

## 16 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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

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

*Katy Lindquist*

Signature of officer administering oath

Katy Lindquist

Printed name of officer administering oath

Notary

Title of officer administering oath

**SUBTOTALS - SPAC****FORM SPAC**  
**COVER SHEET PG 3**  
3 of 23

<b>17 COMMITTEE NAME</b> Our City Our Safety Our Choice PAC		<b>18 Filer ID</b>
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 8,460.74
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 1,000.00
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 5,574.60
9.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
14.	<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: 1/12 Rpt: 4/23
<b>2</b> FILER NAME Our City Our Safety Our Choice PAC		<b>3</b> Filer ID
<b>4</b> Date 08/08/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Linda <b>6</b> Contributor address; City; State; Zip Code 4104 Turkey Creek Dr Austin, TX 78730-3355	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bedford, Jane Contributor address; City; State; Zip Code 3209 W William Cannon Dr Apt B Austin, TX 78745-5030	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bessent, Nancy Contributor address; City; State; Zip Code 2007 Palo Duro Rd Austin, TX 78757-3242	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn, Kathy Contributor address; City; State; Zip Code 8607 Delaware Ct Austin, TX 78758-7422	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bottoms, Shirley Contributor address; City; State; Zip Code 3903 Ridgelea Dr Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/12 Rpt: 5/23
<b>2</b> FILER NAME Our City Our Safety Our Choice PAC		<b>3</b> Filer ID
<b>4</b> Date 08/12/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunch, William	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code 1307 Oxford Ave  Austin, TX 78704	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 09/18/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Cesar, Greg	<b>Amount of Contribution (\$)</b> \$700.00
	<b>Contributor address; City; State; Zip Code</b> PO Box 2391  Austin, TX 78766	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/09/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Cofer, George	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b> 3306 Gentry Dr  Rollingwood, TX 78746-5507	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/12/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Sheryl	<b>Amount of Contribution (\$)</b> \$250.00
	<b>Contributor address; City; State; Zip Code</b> 4101 Wildwood  Austin, TX 78722	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/12/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowden, James	<b>Amount of Contribution (\$)</b> \$150.00
	<b>Contributor address; City; State; Zip Code</b> 1604 Leigh  Austin, TX 78703	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 3/12 Rpt: 6/23

**2** FILER NAME

Our City Our Safety Our Choice PAC

**3** Filer ID

**4** Date  
08/10/2016

**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Craig, Ken

**6** Contributor address; City; State; Zip Code

7100 Whispering Oaks Dr

Austin, TX 78745-5275

**7** Amount of Contribution (\$)

\$250.00

**8** Principal occupation / Job title (See Instructions)

**9** Employer (See Instructions)

Date  
08/12/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Crow, Dan

Contributor address; City; State; Zip Code

2803 Down Cove

Austin, TX 78704

Amount of Contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
08/12/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Curry, Michael

Contributor address; City; State; Zip Code

700 Lavaca Street

Austin, TX 78701

Amount of Contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
08/12/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Elfant, Bruce

Contributor address; City; State; Zip Code

4522 Ave F

Austin, TX 78751

Amount of Contribution (\$)

\$50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
08/12/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ellinger, Hunter

Contributor address; City; State; Zip Code

1622 Waterson

Austin, TX 78703

Amount of Contribution (\$)

\$250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/12 Rpt: 7/23
<b>2</b> FILER NAME Our City Our Safety Our Choice PAC		<b>3</b> Filer ID
<b>4</b> Date 08/12/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faris, Mary <b>6</b> Contributor address; City; State; Zip Code 2400 Elm Glen Austin, TX 78704	<b>7</b> Amount of Contribution (\$) \$150.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, David Contributor address; City; State; Zip Code 1902 Forestglade Dr Austin, TX 78745-1725	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Russell Contributor address; City; State; Zip Code 507 Lockhart Drive Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gasper, Pete Contributor address; City; State; Zip Code 906 W 30th St Austin, TX 78705-2104	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gavenda, Beverly Contributor address; City; State; Zip Code 1010 Little Elm Park Austin, TX 78758-6713	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/12 Rpt: 8/23
<b>2</b> FILER NAME Our City Our Safety Our Choice PAC		<b>3</b> Filer ID
<b>4</b> Date 08/12/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gameda, Merga <hr/> <b>6</b> Contributor address; City; State; Zip Code 6812 Lucy  Austin, TX 78724	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 08/01/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg, Sherri <hr/> <b>Contributor address; City; State; Zip Code</b> 2524 Tanglewood Trl  Austin, TX 78703-1540	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/05/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Grover, Rhonda <hr/> <b>Contributor address; City; State; Zip Code</b> 2607 Pinewood Ter  Austin, TX 78757-2136	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/10/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Guha, Sumit <hr/> <b>Contributor address; City; State; Zip Code</b> 5006 Rowena Ave  Austin, TX 78751-2545	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/01/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Ann Marie <hr/> <b>Contributor address; City; State; Zip Code</b> 4200 Jackson Ave Apt 2002 Austin, TX 78731-6062	<b>Amount of Contribution (\$)</b>  \$20.00
<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: 6/12 Rpt: 9/23
<b>2</b> FILER NAME Our City Our Safety Our Choice PAC		<b>3</b> Filer ID
<b>4</b> Date 08/04/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Ann Marie <hr/> <b>6</b> Contributor address; City; State; Zip Code 4200 Jackson Ave Apt 2002 Austin, TX 78731-6062	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heinen, Anne <hr/> Contributor address; City; State; Zip Code 3010 Washington Sq  Austin, TX 78705-2218	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hintikka, Cindy <hr/> Contributor address; City; State; Zip Code 9700 Rainlilly Ln  Austin, TX 78759-7701	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hohengarten, Nancy <hr/> Contributor address; City; State; Zip Code 4114 Avenue H  Austin, TX 78751-4725	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Robert <hr/> Contributor address; City; State; Zip Code 2315 West Forest Drive  Austin, TX 78704	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: 7/12 Rpt: 10/23

**2** FILER NAME

Our City Our Safety Our Choice PAC

**3** Filer ID

**4** Date  
08/13/2016

**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Iverson, Rick

**6** Contributor address; City; State; Zip Code

506 W 34th St

Austin, TX 78705-1306

**7** Amount of Contribution (\$)

\$50.00

**8** Principal occupation / Job title (See Instructions)

**9** Employer (See Instructions)

Date  
08/10/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kempf, Jill

Contributor address; City; State; Zip Code

2132 Melridge Pl

Austin, TX 78704-2055

Amount of Contribution (\$)

\$35.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
08/04/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kennedy, Marti

Contributor address; City; State; Zip Code

8701 Bluffstone Cv

Apt 9301

Austin, TX 78759-7825

Amount of Contribution (\$)

\$10.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
08/03/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

King, David

Contributor address; City; State; Zip Code

1808 Kerr Ave

Austin, TX 78704-1429

Amount of Contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
08/01/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

League, Karrie

Contributor address; City; State; Zip Code

1305 W 22nd St

Austin, TX 78705-5332

Amount of Contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/12 Rpt: 11/23
<b>2</b> FILER NAME Our City Our Safety Our Choice PAC		<b>3</b> Filer ID
<b>4</b> Date 08/02/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Michael <hr/> <b>6</b> Contributor address; City; State; Zip Code PO Box 146  Austin, TX 78767-0146	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Evelyn <hr/> Contributor address; City; State; Zip Code 7601 Glenhill Cv  Austin, TX 78752-2010	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcelroy, Jim <hr/> Contributor address; City; State; Zip Code 2106 Cullen Ave Apt 212 Austin, TX 78757-2538	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meisenbach, Megan <hr/> Contributor address; City; State; Zip Code 1800 San Gabriel St  Austin, TX 78701-1031	Amount of Contribution (\$)  \$10.74
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffitt, Fred <hr/> Contributor address; City; State; Zip Code 1703 Bauerle Ave  Austin, TX 78704-3303	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/12 Rpt: 12/23
<b>2</b> FILER NAME Our City Our Safety Our Choice PAC		<b>3</b> Filer ID
<b>4</b> Date 08/04/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Laura <hr/> <b>6</b> Contributor address; City; State; Zip Code 610 Baylor St  Austin, TX 78703-5349	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naishtat, Elliott <hr/> Contributor address; City; State; Zip Code 6401 Wilburn Dr  Austin, TX 78757	Amount of Contribution (\$)  \$750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/08/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash, Reuel <hr/> Contributor address; City; State; Zip Code 9712 Llano Estacado Ln  Austin, TX 78759-7764	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oatman, Tamra-shae <hr/> Contributor address; City; State; Zip Code 5922 Lookout Mountain Dr  Austin, TX 78731-3658	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortega, Randy <hr/> Contributor address; City; State; Zip Code 1208 Gemini  Austin, TX 78758	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 10/12 Rpt: 13/23
2 FILER NAME Our City Our Safety Our Choice PAC		3 Filer ID
4 Date 08/05/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peticolas, Anne	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code 5730 Abilene Trail  Austin, TX 78749		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reiser, John	Amount of Contribution (\$) \$165.00
Contributor address; City; State; Zip Code 900 B West 18th  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruffing, Therese	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code 5512 Oakwood Cove #181 Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanger, Mary	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 704 Carolyn Ave  Austin, TX 78705		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheel, Kristin	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 608A W Oltorf St  Austin, TX 78704-5320		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/12 Rpt: 14/23
<b>2</b> FILER NAME Our City Our Safety Our Choice PAC		<b>3</b> Filer ID
<b>4</b> Date 08/12/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweetland, Mark <hr/> <b>6</b> Contributor address; City; State; Zip Code 4402 Nixon Ln  Austin, TX 78725	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 08/04/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Taddesse, Nega <hr/> <b>Contributor address; City; State; Zip Code</b> 11500 Jollyville Rd Apt 2223 Austin, TX 78759-4073	<b>Amount of Contribution (\$)</b>  \$35.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>Date</b> 08/12/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, Phyllis <hr/> <b>Contributor address; City; State; Zip Code</b> 606 W Croslin St  Austin, TX 78752-2320	<b>Amount of Contribution (\$)</b>  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>Date</b> 08/17/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Tovo, Kathie <hr/> <b>Contributor address; City; State; Zip Code</b> 809 W 32nd  Austin, TX 78705	<b>Amount of Contribution (\$)</b>  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>Date</b> 08/12/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Weigand, Ingrid <hr/> <b>Contributor address; City; State; Zip Code</b> 704 W Gibson  Austin, TX 78704	<b>Amount of Contribution (\$)</b>  \$250.00
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: 12/12 Rpt: 15/23

2 FILER NAME

Our City Our Safety Our Choice PAC

3 Filer ID

4 Date  
08/10/2016

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Witte, Tracy

6 Contributor address; City; State; Zip Code

908 E 14th St

Austin, TX 78702-1021

7 Amount of Contribution (\$)

\$100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
08/13/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Yznaga, Mary

Contributor address; City; State; Zip Code

1912 Goodrich Ave

Austin, TX 78704-3308

Amount of Contribution (\$)

\$50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
08/12/2016

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Zeller, Charles

Contributor address; City; State; Zip Code

811 N Tumbleweed Trl

Austin, TX 78733-3243

Amount of Contribution (\$)

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/1 Rpt: 16/23
2 FILER NAME Our City Our Safety Our Choice PAC		3 Filer ID
4 Date 08/12/2016	5 Corporation / Labor Organization name ABCABCO INC (Lone Star Cab)	7 Amount of contribution (\$) \$1,000.00
	6 Corporation / Labor Organization address; City; State; Zip Code 6721 N Lamar Blvd # 200 Austin, TX 78752-3503	



# 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: 17/23	<b>2</b> FILER NAME Our City Our Safety Our Choice PAC	<b>3</b> Filer ID
<b>4</b> Date 08/12/2016	<b>5</b> Payee name Butts, David	
<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code 1914 Patton Ln  Austin, TX 78723	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Repayment
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/16/2016	Candidate/Officeholder name Office sought Office held	
Payee name Butts, David		
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 1914 Patton Ln  Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Repayment
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/31/2016	Candidate/Officeholder name Office sought Office held	
Payee name Butts, David		
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1914 Patton Ln  Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Repayment
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/7 Rpt: 18/23	<b>2</b> FILER NAME Our City Our Safety Our Choice PAC	<b>3</b> Filer ID
<b>4</b> Date 07/08/2016	<b>5</b> Payee name ESC Marketing	
<b>6</b> Amount (\$) \$50.00	<b>7</b> Payee address; City; State; Zip Code 13505 Bolivia Dr  Austin, TX 78729	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/12/2016	Candidate/Officeholder name	Office sought
Payee name ESC Marketing	Office held	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 13505 Bolivia Dr  Austin, TX 78729	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/03/2016	Candidate/Officeholder name	Office sought
Payee name ESC Marketing	Office held	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 13505 Bolivia Dr  Austin, TX 78729	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/03/2016	Candidate/Officeholder name	Office sought
Payee name ESC Marketing	Office held	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 13505 Bolivia Dr  Austin, TX 78729	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/7 Rpt: 19/23		2 FILER NAME Our City Our Safety Our Choice PAC		3 Filer ID	
4 Date 10/21/2016		5 Payee name ESC Marketing			
6 Amount (\$) \$50.00		7 Payee address; City; State; Zip Code 13506 Bolivia Dr  Austin, TX 78729			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/04/2016		Payee name ESC Marketing			
Amount (\$) \$50.00		Payee address; City; State; Zip Code 13506 Bolivia Dr  Austin, TX 78729			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/01/2016		Payee name ESC Marketing			
Amount (\$) \$50.00		Payee address; City; State; Zip Code 13506 Bolivia Dr  Austin, TX 78729			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/7 Rpt: 20/23	<b>2</b> FILER NAME Our City Our Safety Our Choice PAC	<b>3</b> Filer ID
<b>4</b> Date 07/05/2016	<b>5</b> Payee name EveryAction	
<b>6</b> Amount (\$) \$71.20	<b>7</b> Payee address; City; State; Zip Code 1101 15th St NW Ste 500 Washington, DC 20005	
<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 Processing Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/02/2016	Payee name EveryAction	
Amount (\$) \$145.32	Payee address; City; State; Zip Code 1101 15th St NW Ste 500 Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/03/2016	Payee name EveryAction	
Amount (\$) \$13.86	Payee address; City; State; Zip Code 1101 15th St NW Ste 500 Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees
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: 21/23	<b>2</b> FILER NAME Our City Our Safety Our Choice PAC	<b>3</b> Filer ID
<b>4</b> Date 11/02/2016	<b>5</b> Payee name EveryAction	
<b>6</b> Amount (\$) \$1.25	<b>7</b> Payee address; City; State; Zip Code 1101 15th St NW Ste 500 Washington, DC 20005	
<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 Processing Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2016	Payee name EveryAction	
Amount (\$) \$1.25	Payee address; City; State; Zip Code 1101 15th St NW Ste 500 Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/29/2016	Payee name Frost Bank	
Amount (\$) \$7.00	Payee address; City; State; Zip Code P.O. Box 1600  San Antonio, TX 78296	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Service Charge
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: 22/23	<b>2</b> FILER NAME Our City Our Safety Our Choice PAC	<b>3</b> Filer ID
<b>4</b> Date 08/31/2016	<b>5</b> Payee name Frost Bank	
<b>6</b> Amount (\$) \$7.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 1600  San Antonio, TX 78296	
<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 Monthly Service Charge
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/08/2016	Candidate/Officeholder name NGP VAN	Office sought Office held
Amount (\$) \$250.00	Payee address; City; State; Zip Code 1101 15th St NW Suite 500 Washington, DC 20005	
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 Database
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/12/2016	Candidate/Officeholder name NGP VAN	Office sought Office held
Amount (\$) \$250.00	Payee address; City; State; Zip Code 1101 15th St NW Suite 500 Washington, DC 20005	
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 Database
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/7 Rpt: 23/23	<b>2</b> FILER NAME Our City Our Safety Our Choice PAC	<b>3</b> Filer ID
<b>4</b> Date 08/30/2016	<b>5</b> Payee name NGP VAN	
<b>6</b> Amount (\$) \$272.36	<b>7</b> Payee address; City; State; Zip Code 1101 15th St NW Suite 500 Washington, DC 20005	
<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 Excessive Names
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/30/2016	Candidate/Officeholder name Rindy Miller Media	Office sought Office held
Amount (\$) \$220.36	Payee address; City; State; Zip Code 2401 East 6th #1007 Austin, TX 78702	
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 Database Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/16/2016	Candidate/Officeholder name United States Postmaster	Office sought Office held
Amount (\$) \$35.00	Payee address; City; State; Zip Code PO Box 6193 Austin, TX 78762	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PO Box
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		