

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

2 of 26

| | |
|-----------------------------------|-------------|
| 13 C / OH NAME Levinski, Bobby | 14 Filer ID |
|-----------------------------------|-------------|

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

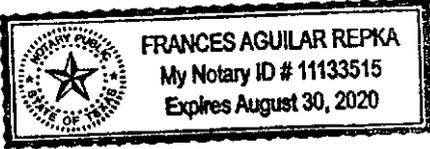
This box is for notice of political contributions accepted or political expenditures made by political candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of

| | |
|---|--|
| <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS |
|---|--|

| | | | |
|-------------------------|---|----|-----------|
| 16 CONTRIBUTION TOTALS | 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) | \$ | 7,260.00 |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 4,008.40 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 32,755.45 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 5,250.00 |

17 AFFADAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



[Handwritten Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Robby Levinski, this the 9th of October, 2018, to certify which, witness my hand and seal of office.

[Handwritten Signature]

Signature of officer administering

Frances Aguilar Repka

Printed name of officer administering

Notary

Title of officer administering oath

SUBTOTALS - C/OH

| | |
|---|--------------------|
| 18 FILER NAME Levinski, Bobby | 19 Filer ID |
|---|--------------------|

| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
|--|-------------|-----------------|
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 7,260.00 | |
| 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 E: LOANS | \$ 1,500.00 | |
| 5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 4,008.40 | |
| 6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ | |
| 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 type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ | |
| 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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 3.00 | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/15 Rpt: 4/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 09/27/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bares, Ryan (Mr.) | 7 Amount of Contribution (\$) \$30.00 |
| 6 Contributor address; City; State; Zip Code 9404 Privet Dr. Austin, TX 78748 | | |
| 8 Principal occupation / Job title (See Instructions) Sales | | 9 Employer (See Instructions) Fit For Work |
| Date 09/25/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrios, Rossana (Ms.) | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 7452 Pusch Ridge Loop Austin, TX 78749 | | |
| Principal occupation / Job title (See Instructions) Strategic Planning Manager | | Employer (See Instructions) Travis County Tax Assessor Collector |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyd, Amanda (Ms.) | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code 406 W. 34th B Austin, TX 78705 | | |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Self |
| Date 09/25/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brinsmade, Louisa | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 1000 E. 15th St. Austin, TX 78702 | | |
| Principal occupation / Job title (See Instructions) Policy Advisor | | Employer (See Instructions) City of Austin |
| Date 09/25/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulla, Dale (Mr.) | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code 7202 Foxtree Cove Austin, TX 78750 | | |
| Principal occupation / Job title (See Instructions) Teacher | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/15 Rpt: 5/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 09/25/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Cecilia | 7 Amount of Contribution (\$) \$100.00 |
| 6 Contributor address; City; State; Zip Code 6500 Santolina Cove Austin, TX 78731 | | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 08/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Lyndon (Mr.) | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code 7208 Moon Rock Austin, TX 78739 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 07/19/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cofer, George (Mr.) | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code 3306 Gentry Dr Austin, TX 78746 | | |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Hill Country Conservancy |
| Date 08/01/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Robert | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code 606 Cliff Dr Austin, TX 78704 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courum, Claudia | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code 9101 Heiden Lane Austin, TX 78749 | | |
| Principal occupation / Job title (See Instructions) Substitute Teacher | | Employer (See Instructions) Austin Independent School District |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/15 Rpt: 6/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 09/27/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel, Harold (Mr.) | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code 3203 Cupid Dr. Austin, TX 78735 | |
| 8 Principal occupation / Job title (See Instructions) Manager | | 9 Employer (See Instructions) BlackBaud |
| Date 08/17/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doherty, Marc (Mr.) | Amount of Contribution (\$) \$350.00 |
| | Contributor address; City; State; Zip Code 4605 Muskdeer Austin, TX 78749 | |
| Principal occupation / Job title (See Instructions) Director of Wholesale & Logistics | | Employer (See Instructions) Lick Honest Ice Cream |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Michael (Mr.) | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code 1502 Romeria Dr Austin, TX 78757 | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Naman Howell Smith & Lee |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eaton, James | Amount of Contribution (\$) \$200.00 |
| | Contributor address; City; State; Zip Code 1003 Justin Lane Apt 2092 Austin, TX 78757 | |
| Principal occupation / Job title (See Instructions) Marketing | | Employer (See Instructions) RTI Surgical |
| Date 08/20/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fetonte, Barbara | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code 8301 Washita Dr Austin, TX 78749 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/15 Rpt: 7/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 08/20/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fetonte, Danny | 7 Amount of Contribution (\$) \$50.00 |
| 6 Contributor address; City; State; Zip Code 8301 Washita Drive Austin, TX 78749 | | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 09/15/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frandsen, Dana & Barbara | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 6704 Poncha Pass Austin, TX 78749 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 08/28/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaudini, Michael | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code 7324 Easy Wind Dr. Austin, TX 78757 | | |
| Principal occupation / Job title (See Instructions) Policy Advisor | | Employer (See Instructions) City of Austin |
| Date 08/08/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Pat (Ms.) | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code 1105 West Annie Street Austin, TX 78704 | | |
| Principal occupation / Job title (See Instructions) Managing Director | | Employer (See Instructions) Save Our Springs Alliance |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Pat (Ms.) | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code 1105 West Annie Street Austin, TX 78704 | | |
| Principal occupation / Job title (See Instructions) Managing Director | | Employer (See Instructions) Save Our Springs Alliance |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/15 Rpt: 8/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 09/27/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Jon (Mr.) | 7 Amount of Contribution (\$) \$40.00 |
| 6 Contributor address; City; State; Zip Code 8603 Alverstone Way Austin, TX 78759 | | |
| 8 Principal occupation / Job title (See Instructions) Small Business Owner | | 9 Employer (See Instructions) Brian Charles LLC |
| Date 09/25/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg, Betsy (Ms.) | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 3009 Washington Sq. Austin, TX 78705 | | |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) University of Texas |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerrero, Linda (Ms.) | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code 3204 Fairfax Walk Austin, TX 78705 | | |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Self |
| Date 08/24/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halpin, Beki | Amount of Contribution (\$) \$20.00 |
| Contributor address; City; State; Zip Code 7107 Stone Ledge Circle Austin, TX 78736 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 08/24/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halpin, Richard | Amount of Contribution (\$) \$20.00 |
| Contributor address; City; State; Zip Code 7107 Stone Ledge Circle Austin, TX 78736 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/15 Rpt: 9/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 08/14/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Timothy | 7 Amount of Contribution (\$) \$350.00 |
| 6 Contributor address; City; State; Zip Code 184 Hazy Hills Loop Dripping Springs, TX 78620 | | |
| 8 Principal occupation / Job title (See Instructions) CEO | | 9 Employer (See Instructions) Praxent |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hersh, Matt (Mr.) | Amount of Contribution (\$) \$350.00 |
| Contributor address; City; State; Zip Code 1409 Gorham Austin, TX 78758 | | |
| Principal occupation / Job title (See Instructions) Statistician | | Employer (See Instructions) The University of Texas |
| Date 09/25/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hetchcox, Leslie | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code 26 Yucca Drive Austin, TX 78744 | | |
| Principal occupation / Job title (See Instructions) Human Resources | | Employer (See Instructions) City of Austin |
| Date 09/25/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hines, Chip | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code 4885A McKnight Rd., #143 Pittsburgh, PA 15237 | | |
| Principal occupation / Job title (See Instructions) N/A | | Employer (See Instructions) N/A |
| Date 08/28/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holl, Lucas (Mr.) | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code 815 Crestoak Place Denton, TX 76209 | | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Mellina & Larson PC |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/15 Rpt: 10/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 09/27/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) House, Kathleen | 7 Amount of Contribution (\$) \$100.00 |
| 6 Contributor address; City; State; Zip Code 1503 Inglewood Street Austin, TX 78741 | | |
| 8 Principal occupation / Job title (See Instructions) Legal Assistant | | 9 Employer (See Instructions) Enoch Kever PLLC |
| Date 08/17/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack, Charles (Mr.) | Amount of Contribution (\$) \$350.00 |
| Contributor address; City; State; Zip Code 4605 Muskdeer Austin, TX 78749 | | |
| Principal occupation / Job title (See Instructions) Senior Director | | Employer (See Instructions) College Entrance Examination Board |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack, Jeff (Mr.) | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 2008B Rabb Glenn St. Austin, TX 78704 | | |
| Principal occupation / Job title (See Instructions) Architect | | Employer (See Instructions) Self |
| Date 09/25/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallerman, Dick (Mr.) | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code 2510 Cedarview Dr Austin, TX 78704 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kearney, Andy | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 221 Adams St Georgetown, TX 78628 | | |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) HomeAway |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|---|--|
| The Instruction Guide explains how to complete this form: | | 1 Total pages Schedule A1: Sch: 8/15 Rpt: 11/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 09/27/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Bryan | 7 Amount of Contribution (\$) \$100.00 |
| 6 Contributor address; City; State; Zip Code 1809 Lightsey Austin, TX 78704 | | |
| 8 Principal occupation / Job title (See Instructions) Broadcasting | | 9 Employer (See Instructions) Self |
| Date 09/25/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiobassa, Jolene (Ms.) | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 3007 West Ave Austin, TX 78705 | | |
| Principal occupation / Job title (See Instructions) Campaign Manager | | Employer (See Instructions) Laura Morrison for Mayor |
| Date 09/26/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laguna, Chris | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code 5416 Daimler Drive Austin, TX 78744 | | |
| Principal occupation / Job title (See Instructions) Program Manager | | Employer (See Instructions) Indeed |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Kevin (Mr.) | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code 1002 Bouldin Ave. Austin, TX 78704 | | |
| Principal occupation / Job title (See Instructions) Buyer | | Employer (See Instructions) Whole Earth Provisions |
| Date 09/25/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Llanes Pulido, Carmen | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 4513 Elwood Rd Austin, TX 78722 | | |
| Principal occupation / Job title (See Instructions) Executive Director, Nonprofit | | Employer (See Instructions) Go Austin/Vamos Austin (GAVA) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/15 Rpt: 12/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 09/27/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macey, Lauren | 7 Amount of Contribution (\$) \$25.00 |
| 6 Contributor address; City; State; Zip Code 4104 Sendero Drive Austin, TX 78735 | | |
| 8 Principal occupation / Job title (See Instructions) Sales | | 9 Employer (See Instructions) LG |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malta, Rodrigo | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code 7721 Woodrow Ave Austin, TX 78757 | | |
| Principal occupation / Job title (See Instructions) Director | | Employer (See Instructions) UT-Austin |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAfee, Melanie (Ms.) | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 4120 Mattie Street Austin, TX 78723 | | |
| Principal occupation / Job title (See Instructions) Special Events | | Employer (See Instructions) Barr Mansion |
| Date 09/25/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClenon, Chuck | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code 5000 Summerset Trl Austin, TX 78749 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) N/A |
| Date 08/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElroy, Jim (Mr.) | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code 2106 Cullen Ave #212 Austin, TX 78757 | | |
| Principal occupation / Job title (See Instructions) Financial Analyst | | Employer (See Instructions) Health and Human Svc Dept |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/15 Rpt: 13/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 09/25/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElroy, Jim (Mr.) | 7 Amount of Contribution (\$) \$10.00 |
| 6 Contributor address; City; State; Zip Code 2106 Cullen Ave #212 Austin, TX 78757 | | |
| 8 Principal occupation / Job title (See Instructions) Financial Analyst | | 9 Employer (See Instructions) Health and Human Svc Dept |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michel, Lori (Ms.) | Amount of Contribution (\$) \$350.00 |
| Contributor address; City; State; Zip Code 917 W Lynn St Austin, TX 78703 | | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Michel Gray, LLP |
| Date 09/26/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minor, William | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 1000 E. 15th St. Austin, TX 78702 | | |
| Principal occupation / Job title (See Instructions) Policy Analyst | | Employer (See Instructions) Texas Workforce Commission |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Note, Martin | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code 1601 E Cesar Chavez St #203 Austin, TX 78702 | | |
| Principal occupation / Job title (See Instructions) Software Architect | | Employer (See Instructions) HomeAway |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Hanlon, Lou | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 5325 Spirea Cove Austin, TX 78749 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/15 Rpt: 14/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 09/22/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Brad (Mr.) | 7 Amount of Contribution (\$) \$100.00 |
| 6 Contributor address; City; State; Zip Code 3706 Greystone Dr. Austin, TX 78731 | | |
| 8 Principal occupation / Job title (See Instructions) Research Analyst | | 9 Employer (See Instructions) Self |
| Date 09/25/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roa, Ruby | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 611 Terrell Hill Dr Austin, TX 78704 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Brian | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code 3902 Amy Circle Austin, TX 78759 | | |
| Principal occupation / Job title (See Instructions) UX | | Employer (See Instructions) Watermark Insights |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rush, Barbara | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 9819 Childress Austin, TX 78753 | | |
| Principal occupation / Job title (See Instructions) Chief of Staff | | Employer (See Instructions) Travis County |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, Robin | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 2609 Sherwood Ln Austin, TX 78704 | | |
| Principal occupation / Job title (See Instructions) Executive Director | | Employer (See Instructions) Texas Campaign for the Environment |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form: | | 1 Total pages Schedule A1: Sch: 12/15 Rpt: 15/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 09/05/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seeger, Patricia (Ms.) | 7 Amount of Contribution (\$) \$125.00 |
| 6 Contributor address; City; State; Zip Code 6705 Winterberry Dr Austin, TX 78750 | | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 09/06/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seeger, Patricia (Ms.) | Amount of Contribution (\$) \$125.00 |
| Contributor address; City; State; Zip Code 6705 Winterberry Dr. Austin, TX 78750 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 07/19/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Shane (Mr.) | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code 8700 Brodie Ln 427 Austin, TX 78745 | | |
| Principal occupation / Job title (See Instructions) Chief of Police | | Employer (See Instructions) Concordia University Texas Police Department |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Shane (Mr.) | Amount of Contribution (\$) \$20.00 |
| Contributor address; City; State; Zip Code 8700 Brodie Ln 427 Austin, TX 78745 | | |
| Principal occupation / Job title (See Instructions) Chief of Police | | Employer (See Instructions) Concordia University Texas Police Department |
| Date 09/06/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Amy (Ms.) | Amount of Contribution (\$) \$350.00 |
| Contributor address; City; State; Zip Code 902-A Ramble Lane Austin, TX 78745 | | |
| Principal occupation / Job title (See Instructions) Policy Advisor | | 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: 13/15 Rpt: 16/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 09/14/2018 | 5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: 209013) Southwest Laborers District Council SWLDC PAC | 7 Amount of Contribution (\$) \$350.00 |
| | 6 Contributor address; City; State; Zip Code 11720 East 21 St Suite D Tulsa, OK 74219 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 09/06/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Speir, Stephen | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code 1225 Corona Drive Austin, TX 78723 | |
| Principal occupation / Job title (See Instructions) N/A | | Employer (See Instructions) Self-Employed |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Steele, Benjamin | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code 908 Poplar St., Apt. 104 Austin, TX 78705 | |
| Principal occupation / Job title (See Instructions) HIV Services | | Employer (See Instructions) AIDS Services of Austin |
| Date 08/11/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Szalay, Barbara (Ms.) | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code 1322 Thaddeus Cove Austin, TX 78746 | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Self |
| Date 09/08/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Szalay, Barbara (Ms.) | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code 1322 Thaddeus Cove Austin, TX 78746 | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 14/15 Rpt: 17/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 09/25/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Szalay, Barbara (Ms.) <hr/> 6 Contributor address; City; State; Zip Code 1322 Thaddeus Cove Austin, TX 78746 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) Self |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tevis, Terry (Ms.) <hr/> Contributor address; City; State; Zip Code 12892 Park Dr Austin, TX 78732 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Property Manager | | Employer (See Instructions) Self |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Umphress, John <hr/> Contributor address; City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757 | Amount of Contribution (\$) \$350.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Austin Energy |
| Date 09/17/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vote PAC <hr/> Contributor address; City; State; Zip Code 3571 Far West Blvd PMB 149 Austin, TX 78731-3064 | Amount of Contribution (\$) \$350.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 08/29/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Benjamin (Mr.) <hr/> Contributor address; City; State; Zip Code 1312 Briarcliff Blvd Austin, TX 78723 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Nonprofit Director | | Employer (See Instructions) ASHwell |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 15/15 Rpt: 18/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 09/27/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Matthew (Mr.) | 7 Amount of Contribution (\$) \$30.00 |
| | 6 Contributor address; City; State; Zip Code 9404 Privet Dr Austin, TX 78748 | |
| 8 Principal occupation / Job title (See Instructions) Sales | | 9 Employer (See Instructions) Fit For Work |
| Date 09/26/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Nathan | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code 1219 S Lamar Blvd Unit 620 Austin, TX 78704 | |
| Principal occupation / Job title (See Instructions) Administrator | | Employer (See Instructions) Girling Healthcare |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Willie (Mr.) | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code 16801 Trail Weary Austin, TX 78754 | |
| Principal occupation / Job title (See Instructions) Operations Manager | | Employer (See Instructions) Federal Express |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winders, Jett | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code 2450 Ashdale Drive #224 Austin, TX 78757 | |
| Principal occupation / Job title (See Instructions) Professional Services | | Employer (See Instructions) Charity Dynamics |
| Date 09/27/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witte, Tracey | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code 908 East 14th Street Austin, TX 78702 | |
| Principal occupation / Job title (See Instructions) Volunteer | | Employer (See Instructions) N/A |

LOANS

SCHEDULE E

| | | |
|---|--|--|
| The Instruction-Guide explains how to complete this form. | | 1 Total pages Schedule E: Sch: 1/1 Rpt: 19/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ |
| 5 Date of loan 08/01/2018 | 7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Levinski, Robert (Bobby) | 9 Loan Amount (\$) \$1,500.00 |
| 6 Is lender a financial institution? No | 8 Lender address; City; State; Zip Code 7711 Croftwood Drive, Unit B Austin, TX 78749 | 10 Interest Rate |
| | | 11 Maturity Date |
| 12 Principal occupation / Job title (See Instructions) Attorney | | 13 Employer (See Instructions) Save Our Springs Alliance |
| 14 Description of Collateral <input checked="" type="checkbox"/> None | | 15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/> |
| 16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable | 17 Name of guarantor | |
| | 18 Guarantor address; City; State; Zip Code | |
| 20 Principal occupation | | 19 Amount Guaranteed (\$) |
| 21 Employer (See Instructions) | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | |
|---|--|---|--|---|
| 1 Total pages Schedule F1: Sch: 1/6 Rpt: 20/26 | | 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 09/01/2018 | | 5 Payee name Austin Young Democrats | | |
| 6 Amount (\$) \$100.00 | | 7 Payee address; City; State; Zip Code Address Unknown Austin, TX 78701 | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship of 2018 JJ After Party |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 09/06/2018 | | Payee name Burdick, Lucas | | |
| Amount (\$) \$370.00 | | Payee address; City; State; Zip Code 7711 Croftwood Drive, Unit B Austin, TX 78749 | | |
| 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 Canvassing |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 09/02/2018 | | Payee name Capitol Area Progressive Democrats | | |
| Amount (\$) \$100.00 | | Payee address; City; State; Zip Code PO Box 413 Austin, TX 78767 | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship of CAPD KickAss Awards |
| 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.

| | | | | | |
|---|--|--|--|---|--|
| 1 Total pages Schedule F1: Sch: 2/6 Rpt: 21/26 | | 2 FILER NAME Levinski, Bobby | | 3 Filer ID | |
| 4 Date 09/06/2018 | | 5 Payee name CheckMark Typesetting | | | |
| 6 Amount (\$) \$1,935.04 | | 7 Payee address; City; State; Zip Code 3217 N IH 35 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 Yard Signs | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 08/11/2018 | | Payee name CheckMark Typesetting | | | |
| Amount (\$) \$27.06 | | Payee address; City; State; Zip Code 3217 N IH 35 Austin, TX 78722 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Printing Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banner | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 07/18/2018 | | Payee name Circle C Area Democrats | | | |
| Amount (\$) \$250.00 | | Payee address; City; State; Zip Code 7008 Colberg Ct Austin, TX 78749 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship of Blue Stars Across Texas event | |
| 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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--|
| 1 Total pages Schedule F1: Sch: 3/6 Rpt: 22/26 | | 2 FILER NAME Levinski, Bobby | | 3 Filer ID | |
| 4 Date 07/28/2018 | | 5 Payee name Constant Contact | | | |
| 6 Amount (\$) \$69.29 | | 7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451 | | | |
| 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 Email Distribution | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| Date 08/28/2018 | | Payee name Constant Contact | | | |
| Amount (\$) \$69.29 | | Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451 | | | |
| 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 Email Distribution | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| Date 09/06/2018 | | Payee name Frost Bank | | | |
| Amount (\$) \$10.00 | | Payee address; City; State; Zip Code 4301 W. William Cannon Dr. Austin, TX 78749 | | | |
| 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 Check Printing | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |

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: 4/6 Rpt: 23/26 | 2 FILER NAME Levinski, Bobby | 3 Filer ID |
| 4 Date 07/28/2018 | 5 Payee name GoDaddy.com | |
| 6 Amount (\$) \$24.50 | 7 Payee address; City; State; Zip Code 14455 N Hayden Rd Scottsdale, AZ 85260 | |
| 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 Website |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate/Officeholder name | Office sought | Office held |
| Date 08/28/2018 | Payee name GoDaddy.com | |
| Amount (\$) \$24.50 | Payee address; City; State; Zip Code 14455 N Hayden Rd Scottsdale, AZ 85260 | |
| 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 Website |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate/Officeholder name | Office sought | Office held |
| Date 08/03/2018 | Payee name Office Depot | |
| Amount (\$) \$43.48 | Payee address; City; State; Zip Code 5300 S MoPac Expressway, #101 Austin, TX 78749 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Paper, Pens, and Other Supplies | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Paper, Pens and Other 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.

| | | | | | |
|---|--|--|--|---|--|
| 1 Total pages Schedule F1: Sch: 5/6 Rpt: 24/26 | | 2 FILER NAME Levinski, Bobby | | 3 Filer ID | |
| 4 Date 07/10/2018 | | 5 Payee name RindyMiller Media | | | |
| 6 Amount (\$) \$950.00 | | 7 Payee address; City; State; Zip Code 2401 E 6th St Austin, TX 78702 | | | |
| 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 Design work and printing of campaign literature | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| Date 09/18/2018 | | Payee name UT Parking | | | |
| Amount (\$) \$6.00 | | Payee address; City; State; Zip Code 1815 Trinity St. Austin, TX 78701 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Parking Fee | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking on UT Campus | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| Date 09/27/2018 | | Payee name WePay | | | |
| Amount (\$) \$3.22 | | Payee address; City; State; Zip Code 200 350 Convention Way Redwood City, CA 94063 | | | |
| 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 Contribution Processing Fees | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|---|--|--|--|
| 1 Total pages Schedule F1: Sch: 6/6 Rpt: 25/26 | | 2 FILER NAME Levinski, Bobby | | 3 Filer ID | |
| 4 Date 09/25/2018 | | 5 Payee name WePay | | | |
| 6 Amount (\$) \$3.22 | | 7 Payee address; City; State; Zip Code 200 350 Convention Way Redwood City, CA 94063 | | | |
| 8 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 Contribution Processing Fees | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | | | | |
| Candidate/Officeholder name | | Office sought | | Office held | |
| Date 08/28/2018 | | Payee name WePay | | | |
| Amount (\$) \$1.77 | | Payee address; City; State; Zip Code 200 350 Convention Way Redwood City, CA 94063 | | | |
| 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 Contribution Processing Fees | |
| Complete ONLY if direct expenditure to benefit C/OH | | | | | |
| Candidate/Officeholder name | | Office sought | | Office held | |
| Date 08/17/2018 | | Payee name WePay | | | |
| Amount (\$) \$21.03 | | Payee address; City; State; Zip Code 200 350 Convention Way Redwood City, CA 94063 | | | |
| 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 Contribution Processing Fees | |
| Complete ONLY if direct expenditure to benefit C/OH | | | | | |
| Candidate/Officeholder name | | Office sought | | Office held | |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 1/1 Rpt: 26/26 |
| 2 FILER NAME Levinski, Bobby | | 3 Filer ID |
| 4 Date 09/13/2018 | 5 Name of person from whom amount is received Frost Bank | 8 Amount (\$) \$1.25 |
| 6 Address of person from whom amount is received; City; State; Zip Code 4301 W William Cannon Dr Bldg I Austin, TX 78749 | | |
| 7 Purpose for which amount is received Interest | | <input type="checkbox"/> Check if political contribution returned to filer |
| Date 08/10/2018 | Name of person from whom amount is received Frost Bank | Amount (\$) \$1.05 |
| Address of person from whom amount is received; City; State; Zip Code 4301 W William Cannon Dr Bldg I Austin, TX 78749 | | |
| Purpose for which amount is received Interest | | <input type="checkbox"/> Check if political contribution returned to filer |
| Date 07/12/2018 | Name of person from whom amount is received Frost Bank | Amount (\$) \$0.70 |
| Address of person from whom amount is received; City; State; Zip Code 4301 W William Cannon Dr Bldg I Austin, TX 78749 | | |
| Purpose for which amount is received Interest | | <input type="checkbox"/> Check if political contribution returned to filer |