

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC
COVER SHEET PG 1

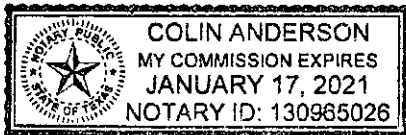
The SPAC Instruction Guide explains how to complete this form.		1 Filer ID		2 Total pages filed: 20	
3 COMMITTEE NAME Austin Together				OFFICE USE ONLY Date Received OCT 29 '18 PM 3:27	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 604 W. 11th St. Austin, TX 78701				
	Date Hand-delivered or Date Postmarked				
	Receipt #		Amount		
	Date Processed				
	Date Imaged				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI		
	Ms.	Brandi	C		
	NICKNAME	LAST	SUFFIX		
		Burton			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 604 W. 11th St. Austin TX 78701				
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		
	512	939-9776			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 Limit <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination				
10 PERIOD COVERED	Month Day Year Month Day Year 09/28/2018 THROUGH 10/27/2018				
11 ELECTION	ELECTION DATE Month Day Year 11/06/2018		ELECTION TYPE		
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
GO TO PAGE 2					

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME Austin Together		13 Filer ID		
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate <input type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME 		
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) 		
	<input checked="" type="checkbox"/> Measure	BALLOT IDENTIFICATION / # A		ELECTION DATE Month Day Year 11/06/2018
		DESCRIPTION Proposition A: Affordable Housing		
15 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)		\$ 94,125.00	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00	
	4. TOTAL POLITICAL EXPENDITURES		\$ 137,507.99	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 22,678.04	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00	

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.

Brandi Clark Burton
Signature of Campaign Treasurer

Sworn to and subscribed before me, by the said Brandi Clark Burton, this the 29th day of October, 20 18, to certify which, witness my hand and seal of office.

Colin Anderson
Signature of officer administering oath

Colin Anderson
Printed name of officer administering oath

Notary Public
Title of officer administering oath

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE

FORM SPAC
ADDENDUM

Page 3 of 20

12 COMMITTEE NAME Austin Together		13 Filer ID	
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICE HOLDER	CANDIDATE / OFFICE HOLDER NAME	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)	
	<input checked="" type="checkbox"/> MEASURE	BALLOT IDENTIFICATION B	
		ELECTION DATE MONTH DAY YEAR 11/06/2018	
		DESCRIPTION Proposition B: Libraries, Museums and Cultural Arts Facilities	
COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICE HOLDER	CANDIDATE / OFFICE HOLDER NAME	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)	
	<input checked="" type="checkbox"/> MEASURE	BALLOT IDENTIFICATION C	
		ELECTION DATE MONTH DAY YEAR 11/06/2018	
		DESCRIPTION Proposition C: Parks and Recreation	
COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICE HOLDER	CANDIDATE / OFFICE HOLDER NAME	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)	
	<input checked="" type="checkbox"/> MEASURE	BALLOT IDENTIFICATION D	
		ELECTION DATE MONTH DAY YEAR 11/06/2018	
		DESCRIPTION Proposition D: Flood Mitigation, Open Space and Water Quality Protection	

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **SPAC**
ADDENDUM

Page 4 of 20

12 COMMITTEE NAME Austin Together		13 Filer ID		
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICE HOLDER	CANDIDATE / OFFICE HOLDER NAME		
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)		
	<input checked="" type="checkbox"/> MEASURE	BALLOT IDENTIFICATION E		ELECTION DATE MONTH DAY YEAR 11/06/2018
		DESCRIPTION Proposition E: Health and Human Services		
COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICE HOLDER	CANDIDATE / OFFICE HOLDER NAME		
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)		
	<input checked="" type="checkbox"/> MEASURE	BALLOT IDENTIFICATION F		ELECTION DATE MONTH DAY YEAR 11/06/2018
		DESCRIPTION Proposition F: Public Safety		
COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICE HOLDER	CANDIDATE / OFFICE HOLDER NAME		
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)		
	<input checked="" type="checkbox"/> MEASURE	BALLOT IDENTIFICATION G		ELECTION DATE MONTH DAY YEAR 11/06/2018
		DESCRIPTION Proposition G: Transportation Infrastructure		

SUBTOTALS - SPAC**FORM SPAC**
COVER SHEET PG 3
5 of 20**17 COMMITTEE NAME**

Austin Together

18 Filer ID**19 SCHEDULE SUBTOTALS**

NAME OF SCHEDULE

SUBTOTAL AMOUNT

- | | | | | |
|-----|-------------------------------------|--|----|------------|
| 1. | <input checked="" type="checkbox"/> | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ | 38,125.00 |
| 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 C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ | 56,000.00 |
| 5. | <input type="checkbox"/> | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ | |
| 6. | <input checked="" type="checkbox"/> | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ | 7,500.00 |
| 7. | <input type="checkbox"/> | SCHEDULE E: LOANS | \$ | |
| 8. | <input checked="" type="checkbox"/> | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | 137,507.99 |
| 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 checked="" type="checkbox"/> | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ | 5,000.00 |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/5 Rpt: 6/20
2 FILER NAME Austin Together		3 Filer ID
4 Date 10/04/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Board of Realtors PAC <hr/> 6 Contributor address; City; State; Zip Code 4105 Medical Parkway Austin, TX 78756	7 Amount of Contribution (\$) \$15,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beall, Jon <hr/> Contributor address; City; State; Zip Code 2503 Flora Cv Austin, TX 78746-6902	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) TDI
Date 10/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bull, Blaine <hr/> Contributor address; City; State; Zip Code 2909 Montebello Ct Austin, TX 78746-6816	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Vianovo
Date 10/22/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coddington, Jeff <hr/> Contributor address; City; State; Zip Code PO Box 5002 Austin, TX 78763-5002	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) JLL
Date 10/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Aan <hr/> Contributor address; City; State; Zip Code 9890 Silver Mountain Dr Austin, TX 78737-3103	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Landscape Architect		Employer (See Instructions) Coleman & Assoc

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/5 Rpt: 7/20
2 FILER NAME Austin Together		3 Filer ID
4 Date 10/19/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dolezal, Brian 6 Contributor address; City; State; Zip Code 1309 Norwood Rd Austin, TX 78722-1031	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Vice President of Mueller Marketing & Communications		9 Employer (See Instructions) Catellus
Date 10/12/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Driftwood Historical Conservation Society Contributor address; City; State; Zip Code P.O. Box 9 Driftwood, TX 78619	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Arnold Contributor address; City; State; Zip Code P.O. Box 2287 Austin, TX 78768	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 10/20/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrod, Julia Contributor address; City; State; Zip Code 305 E Huntland Dr Austin, TX 78752-3736	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) MWM Design Group
Date 09/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heidrick, Clarke Contributor address; City; State; Zip Code 3702 Eastledge Dr Austin, TX 78731-5851	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Mcginnis Lochridge

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/5 Rpt: 8/20
2 FILER NAME Austin Together		3 Filer ID
4 Date 10/02/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Gary 6 Contributor address; City; State; Zip Code 1221 S Mo Pac Expy Ste 400 Austin, TX 78746-7650	7 Amount of Contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Keller Williams Realty
Date 10/17/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, David Contributor address; City; State; Zip Code 1808 Kerr Ave Austin, TX 78704-1429	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Robert Contributor address; City; State; Zip Code 504 W 24th St Ste E Austin, TX 78705-5231	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Pearlstone Partners
Date 10/12/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liberal Austin Democrats Contributor address; City; State; Zip Code P.O. Box 49712 Austin, TX 78768	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Lew Contributor address; City; State; Zip Code 2806 Stratford Dr Austin, TX 78746-4627	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Healthcare Executive		Employer (See Instructions) Covenant Surgical Partners

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/5 Rpt: 9/20
2 FILER NAME Austin Together		3 Filer ID
4 Date 10/25/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manchester, Douglas 6 Contributor address; City; State; Zip Code 101 Red River St Level 6 Austin, TX 78701-4646	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Real Estate Development		9 Employer (See Instructions) Manchester Financial Group
Date 10/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moorhead, Scott Contributor address; City; State; Zip Code 4513 Rowood Rd Rowood Rd Austin, TX 78722-1038	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Woods Prairie
Date 10/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitts, John Contributor address; City; State; Zip Code 1703 Mohle Dr Austin, TX 78703-1811	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) John R Pitts Jr LLC
Date 10/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Precourt, Anthony Contributor address; City; State; Zip Code 869 Culebra Rd Hillsborough, CA 94010-6963	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Precourt Sports Ventures
Date 10/12/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushing, Ruthann Contributor address; City; State; Zip Code 130 World of Tennis Sq Lakeway, TX 78738	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/5 Rpt: 10/20
2 FILER NAME Austin Together		3 Filer ID
4 Date 09/28/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smitheal, Jeremy <hr/> 6 Contributor address; City; State; Zip Code 100 Congress Ave Ste 1450 Austin, TX 78701-4072	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Partner		9 Employer (See Instructions) Riverside Resources
Date 10/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soeur, Channy <hr/> Contributor address; City; State; Zip Code 7908 Cameron Rd Austin, TX 78754-3850	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) CAS Consulting & Services
Date 10/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taniguchi, Evan <hr/> Contributor address; City; State; Zip Code 1609 W 6th St Austin, TX 78703-5059	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Taniguchi Architects
Date 10/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Bob <hr/> Contributor address; City; State; Zip Code 1707 Romeria Dr Austin, TX 78757-3323	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 10/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Sarah <hr/> Contributor address; City; State; Zip Code 2416 W 12th St Austin, TX 78703-3813	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) WP Engine

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/2 Rpt: 11/20
2 FILER NAME Austin Together		3 Filer ID
4 Date 10/19/2018	5 Corporation / Labor Organization name Ascension 6 Corporation / Labor Organization address; City; State; Zip Code 4040 Vincennes Circle Indianapolis, IN 46268	7 Amount of contribution (\$) \$2,500.00
Date 10/04/2018	Corporation / Labor Organization name Balcones Resources, Inc. Corporation / Labor Organization address; City; State; Zip Code 9301 Johnny Morris Rd. Austin, TX 78724	Amount of contribution (\$) \$1,000.00
Date 09/28/2018	Corporation / Labor Organization name Binkley & Barfield Corporation / Labor Organization address; City; State; Zip Code 1710 Seamist Dr Houston, TX 77008	Amount of contribution (\$) \$2,500.00
Date 10/19/2018	Corporation / Labor Organization name CP&Y, Inc. Corporation / Labor Organization address; City; State; Zip Code 1820 Regal Row Ste. 200 Dallas, TX 75235	Amount of contribution (\$) \$1,000.00
Date 10/10/2018	Corporation / Labor Organization name Catellus Development Corporation Corporation / Labor Organization address; City; State; Zip Code 66 Franklin St. Ste. 200 Oakland, CA 94607	Amount of contribution (\$) \$10,000.00
Date 09/28/2018	Corporation / Labor Organization name HDR, Inc. Corporation / Labor Organization address; City; State; Zip Code 8404 Indian Hills Dr. Omaha, NE 68114	Amount of contribution (\$) \$5,000.00
Date 10/16/2018	Corporation / Labor Organization name Lockwood, Andrews, & Newman, Inc. Corporation / Labor Organization address; City; State; Zip Code 8600 Indian Hills Dr. Omaha, NE 68114	Amount of contribution (\$) \$5,000.00

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 2/2 Rpt: 12/20
2 FILER NAME Austin Together		3 Filer ID
4 Date 10/15/2018	5 Corporation / Labor Organization name One Gas Inc. <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code P.O. Box 21049 Tulsa, OK 74121	7 Amount of contribution (\$) \$2,000.00
Date 10/11/2018	Corporation / Labor Organization name SXSU LLC <hr/> Corporation / Labor Organization address; City; State; Zip Code P.O. Box 685289 Austin, TX 78768	Amount of contribution (\$) \$5,000.00
Date 09/28/2018	Corporation / Labor Organization name Stratus Properties Operating Company <hr/> Corporation / Labor Organization address; City; State; Zip Code 212 Lavaca St. Ste. 300 Austin, TX 78701	Amount of contribution (\$) \$10,000.00
Date 10/19/2018	Corporation / Labor Organization name Surveying and Mapping, Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code 4801 Southwest Parkway Parkway Two, Suite 100 Austin, TX 78735	Amount of contribution (\$) \$1,000.00
Date 10/03/2018	Corporation / Labor Organization name Texas Disposal Systems, Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code P.O. Box 17126 Austin, TX 78760	Amount of contribution (\$) \$1,000.00
Date 10/05/2018	Corporation / Labor Organization name Upland Software Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code 401 Congress Ave. Ste. 1850 Austin, TX 78701	Amount of contribution (\$) \$10,000.00

**PLEDGED CONTRIBUTIONS FROM CORPORATION OR
LABOR ORGANIZATION**

SCHEDULE D

The Instruction Guide explains how to complete this form.

1 Total pages Schedule D:
Sch: 1/1 Rpt: 13/20

2 FILER NAME
Austin Together

3 Filer ID

4 Date
10/26/2018

5 Corporation / Labor Organization Name
Brandywine Realty Trust

7 Amount of
pledge (\$)
\$7,500.00

8 In-kind description (if
applicable)

6 Corporation / Labor Organization address; City; State; Zip Code
300 Arboretum Place
Suite 330
Richmond, VA 23236

☐ Check if travel outside of Texas. Complete Schedule T.

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: 14/20		2 FILER NAME Austin Together		3 Filer ID
4 Date 10/23/2018		5 Payee name Austin Chronicle		
6 Amount (\$) \$1,545.00		7 Payee address; City; State; Zip Code PO Box 4189 Austin, TX 78765		
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 Chronicle Ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought
Office held				
Date 10/15/2018		Payee name Austin Chronicle		
Amount (\$) \$1,545.00		Payee address; City; State; Zip Code PO Box 4189 Austin, TX 78765		
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 Chronicle Ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought
Office held				
Date 10/17/2018		Payee name Butts, David		
Amount (\$) \$4,500.00		Payee address; City; State; Zip Code 1905 Patton Ln Austin, TX 78723		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consultant
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: 2/6 Rpt: 15/20		2 FILER NAME Austin Together		3 Filer ID	
4 Date 10/15/2018		5 Payee name City Lights Group			
6 Amount (\$) \$27,971.00		7 Payee address; City; State; Zip Code 1605 Kerr Drive Austin, TX 78704			
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 TV Commercial	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/10/2018		Payee name City Lights Group			
Amount (\$) \$5,000.00		Payee address; City; State; Zip Code 1605 Kerr Drive Austin, TX 78704			
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 Video Production	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/03/2018		Payee name City Lights Group			
Amount (\$) \$90,000.00		Payee address; City; State; Zip Code 1605 Kerr Drive Austin, TX 78704			
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 TV Commercial	
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: 3/6 Rpt: 16/20		2 FILER NAME Austin Together		3 Filer ID	
4 Date 10/18/2018		5 Payee name Facebook			
6 Amount (\$) \$2.36		7 Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
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 Social Media Ads	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/17/2018		Payee name Facebook			
Amount (\$) \$400.00		Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
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 Social Media Ads	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/04/2018		Payee name Facebook			
Amount (\$) \$250.00		Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
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 Social Media Ads	
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: 17/20		2 FILER NAME Austin Together		3 Filer ID	
4 Date 10/01/2018		5 Payee name Facebook			
6 Amount (\$) \$175.00		7 Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
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 Social Media Ads	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/28/2018		Payee name Facebook			
Amount (\$) \$125.00		Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
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 Social Media Ads	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/12/2018		Payee name GNI Strategies			
Amount (\$) \$3,000.00		Payee address; City; State; Zip Code P.O. Box 685008 Austin, TX 78768			
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 Finance Consultant	
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: 5/6 Rpt: 18/20		2 FILER NAME Austin Together		3 Filer ID	
4 Date 10/02/2018		5 Payee name NGP VAN, Inc.			
6 Amount (\$) \$134.00		7 Payee address; City; State; Zip Code P.O. Box 392264 Pittsburgh, PA 15221			
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 Database Software	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/09/2018		Payee name Office Depot			
Amount (\$) \$12.97		Payee address; City; State; Zip Code 816 Tirado St Austin, TX 78752			
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 Office Supplies	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/01/2018		Payee name Paya			
Amount (\$) \$829.66		Payee address; City; State; Zip Code 12120 Sunset Hills Road Suite 500 Reston, VA 20190			
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 Credit Card 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: 19/20	2 FILER NAME Austin Together	3 Filer ID
4 Date 10/03/2018	5 Payee name Premier Parking	
6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 144 2nd Avenue North 3rd Floor Nashville, TN 37201	
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 Parking
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/12/2018	Payee name TCDP	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 1311 E 6th St Austin, TX 78702	
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 Donation
Complete <u>ONLY</u> 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: 20/20**2** FILER NAME

Austin Together

3 Filer ID**4** Date

10/19/2018

5 Name of person from whom amount is received

Catellus Development Corporation

8 Amount (\$)

\$5,000.00

6 Address of person from whom amount is received; City; State; Zip Code

66 Franklin St.

Ste. 200

Oakland, CA 94607

7 Purpose for which amount is received☒ Check if political contribution returned to filer