

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

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|--|--|--|-------------------------------------|
| The GPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00082658 | 2 Total pages filed: 10 |
| 3 COMMITTEE NAME CAFPAC | | OFFICE USE ONLY Date Received ELECTRONICALLY FILED 12/03/2018 Date Hand-delivered or Date Postmarked Receipt # Date Processed Date Imaged | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4701 Gillis St. Austin, TX 78745 | | OCC RECEIVED AT DEC 3 18 PM 5:08 |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI Mr. Jeffrey L. NICKNAME LAST SUFFIX Hahn | | |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4200 Marathon Blvd., Suite 300 Austin, TX 78756 | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4200 Marathon Blvd., Suite 300 Austin, TX 78756 | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (512) 626-4971 | | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input checked="" type="checkbox"/> Runoff | | |
| 10 PERIOD COVERED | Month Day Year THROUGH Month Day Year 10/28/2018 12/01/2018 | | |
| 11 ELECTION | ELECTION DATE Month Day Year 12/11/2018 | ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | |

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC
COVER SHEET PG 2

| | | | |
|---|--|---|-----------|
| 12 COMMITTEE NAME CAFPAC | | 13 Filer ID (Ethics Commission Filers) 00082658 | |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Danielle Skidmore Austin City Council District 9 | |
| | | B. Opposed | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported | |
| | | B. Opposed | |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | |
| | 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ |
| 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | \$ | 17,220.00 |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 78,448.16 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 30,541.96 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 0.00 |

16 AFFIDAVIT

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

Mr. Jeffrey L. Hahn

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 10

| | | |
|--|---|---|
| 17 COMMITTEE NAME CAFPAC | | 18 Filer ID (Ethics Commission Filers) 00082658 |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 12,220.00 |
| 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 | \$ 5,000.00 |
| 5. | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 6. | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 7. | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 8. | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 9. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 10. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 67,623.16 |
| 11. | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ 10,825.00 |
| 12. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 13. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 14. | <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 27.43 |
| 15. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/2 Rpt: 4/10 |
| 2 FILER NAME CAFPAC | | 3 Filer ID (Ethics Commission Filers) 00082658 |
| 4 Date 10/30/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Builders and Contractors PAC <hr/> 6 Contributor address; City; State; Zip Code 2600 Longhorn Blvd # 105 Austin, TX 78758 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/29/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bukowski, Sean <hr/> Contributor address; City; State; Zip Code 1601 Rio Grande St . Suite 300A Austin, TX 78701 | Amount of Contribution (\$) \$10,000.00 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) |
| Date 10/30/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Kevin <hr/> Contributor address; City; State; Zip Code 801 W. 5th St #100 Austin, TX 78703 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Real Estate | | Employer (See Instructions) |
| Date 11/13/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Jose <hr/> Contributor address; City; State; Zip Code 3807 Toro Canyon #8 Austin, TX 78746 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Non-Profit Manager | | Employer (See Instructions) |
| Date 11/13/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ishmael, Ralph <hr/> Contributor address; City; State; Zip Code 3009 N Lamar Blvd Austin, TX 78705 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/10 |
| 2 FILER NAME CAFPAC | | 3 Filer ID. (Ethics Commission Filers) 00082658 |
| 4 Date 10/30/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman, Paul 6 Contributor address; City; State; Zip Code 809 Cuernavaca Dr N Austin, TX 78733 | 7 Amount of Contribution (\$) \$350.00 |
| 8 Principal occupation / Job title (See Instructions) Real Estate | | 9 Employer (See Instructions) Thrive FP |
| Date 10/30/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shade, Randi Contributor address; City; State; Zip Code 1822 W. 10th St Austin, TX 78703 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Consultant | | 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: 6/10 |
| 2 FILER NAME CAFPAC | | 3 Filer ID (Ethics Commission Filers) 00082658 |
| 4 Date 11/19/2018 | 5 Corporation / Labor Organization name Rivendale Homes Texas, LLC | 7 Amount of contribution (\$) \$5,000.00 |
| | 6 Corporation / Labor Organization address; City; State; Zip Code 1114 Lost Creek Blvd #200 Austin, TX 78746 | |

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: 1/2 Rpt: 7/10 | | 2 FILER NAME CAFPAC | | 3 Filer ID (Ethics Commission Filers) 00082658 | |
| 4 Date 11/05/2018 | | 5 Payee name Neumann Limited Partnership | | | |
| 6 Amount (\$) \$50,000.00 | | 7 Payee address; City; State; Zip Code 5417 Pine St Bellaire, TX 77401 | | | |
| <input checked="" type="checkbox"/> Expenditure from corporate funds | | | | | |
| 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 Mailers | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Skidmore, Danielle | | Office sought Austin City Council Place 9 | |
| Date 11/05/2018 | | Payee name Neumann Limited Partnership | | | |
| Amount (\$) \$2,623.16 | | Payee address; City; State; Zip Code 5417 Pine St Bellaire, TX 77401 | | | |
| <input checked="" type="checkbox"/> Expenditure from corporate funds | | | | | |
| 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 Mailers | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Skidmore, Danielle | | Office sought Austin City Council Place 9 | |
| Date 11/13/2018 | | Payee name The American People LLC | | | |
| Amount (\$) \$5,000.00 | | Payee address; City; State; Zip Code 1308 NW 6th Ave Gainesville, FL 32603 | | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | | | |
| 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 Banner Advertising | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Skidmore, Danielle | | Office sought Austin City Council Place 9 | |

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: 2/2 Rpt: 8/10 | 2 FILER NAME CAFPAC | 3 Filer ID (Ethics Commission Filers) 00082658 |
| 4 Date 11/01/2018 | 5 Payee name The American People LLC | |
| 6 Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1308 NW 6th Ave Gainesville, FL 32603 | |
| 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 Banner Advertising |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Skidmore, Danielle | Office sought Austin City Council Place 9 Office held |

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F2: Sch: 1/1 Rpt: 9/10 | 2 FILER NAME CAFPAC | 3 Filer ID (Ethics Commission Filers) 00082658 |
| 4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS | | \$ |
| 5 Date 10/29/2018 | 6 Payee name Influence Opinions | |
| 7 Amount (\$) \$10,825.00 <input type="checkbox"/> Expenditure from corporate funds | 8 Payee address; City; State; Zip Code 9600 Escarpment Blvd Suite 745-223 Austin, TX 78739 | |
| 9 TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | |
| 10 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 Ads |
| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Renteria, Pio | Office sought Austin City Council Place 3 Office held Austin City Council Place n/a |

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

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|--|--|--|
| 1 Total pages Schedule I: Sch: 1/1 Rpt: | 2 FILER NAME CAFPAC | 3 Filer ID (Ethics Commission Filers) 00082658 |
| 4 Date 10/30/2018 | 5 Payee name IBC Bank | |
| 6 Amount (\$) 1.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee Address; City; State; Zip 500 W 5th St #100 Austin, TX 78701 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Accounting/Banking | (b) Description (See instructions regarding type of information required.) Mobile Deposit fees |
| Date 10/31/2018 | Payee name PayPal | |
| Amount (\$) 18.00 <input checked="" type="checkbox"/> Expenditure from corporate funds | Payee Address; City; State; Zip 2211 North First Street San Jose, CA 95131 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Accounting/Banking | (b) Description (See instructions regarding type of information required.) Fees |
| Date 11/13/2018 | Payee name PayPal | |
| Amount (\$) 8.43 <input type="checkbox"/> Expenditure from corporate funds | Payee Address; City; State; Zip 2211 North First Street San Jose, CA 95131 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Accounting/Banking | (b) Description (See instructions regarding type of information required.) Fees |