FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. 10 3 COMMITTEE NAME OFFICE USE ONLY PACE PAC Date Received OCC RECEIVED AT OCT 28'19 PM1:37 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 3110 Manor Rd Date Hand-delivered or Date Postmarked Ste H Change of Address Austin, TX 78723 Receipt # Amount Date Processed Date Imaged 5 CAMPAIGN MS/MRS/MR FIRST **TREASURER** James NAME **NICKNAME** LAST SUFFIX Russell STREET ADDRESS (NO PO BOX PLEASE); CAMPAIGN APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1801B Ann Arbor Ave, Austin TX 78704 STREET **ADDRESS** (Residence or Business) STREET OR PO BOX; CAMPAIGN APT / SUITE #; CITY; STATE; ZIP CODE TREASURER MAILING **ADDRESS** Change of Address AREA CODE PHONE NUMBER **EXTENSION** CAMPAIGN **TREASURER PHONE** 512-667-0486 9 REPORT Exceeded \$500 Limit January 15 30th day before election TYPE X 8th day before election Dissolution (Attach PAC-DR) July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Month Day Year Month Day Year COVERED **THROUGH** 10/25/2019 09/27/2019 **ELECTION TYPE** 11 ELECTION **ELECTION DATE** Day Year Primary Runoff Other 11/05/2019 X General Special **GO TO PAGE 2**

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC

FORFOSE AN	DIOIALS		COV	EK SHI	EET PG 2
12 COMMITTEE NAME			L3 Filer ID		
PACE PAC					
14 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME			
(Attach lists on plain paper to complete this	Candidate				
report if necessary.)	Officeholder	OFFICE SOUGHT (candidate) / OFFICE HELD	(officeholder)		
	-				
SUPPORT					
(Candidate or Measure)		BALLOT IDENTIFICATION / #	ELECT	ION DATE	
ODDOSE		Prop A	Month	Day	Year
X OPPOSE (Candidate or Measure)			11/05/2	2019	
	X Measure				
(Officeholder)	-	DESCRIPTION			
(Officeriolder)		Austin Voter Approval for Sports and Ente	rtainment Ve	nue Cons	truction on
		City Land			
15 CONTRIBUTION	1. TOTAL POLITICAL CON	L ITRIBUTIONS OF \$50 OR LESS (OTHER THAN	PLEDGES,	Т	
TOTALS	LOANS, OR GUARANTE	EES OF LOANS), UNLESS ITEMIZED		\$	\$0.00
	2. TOTAL POLITICAL C				* 07 5 04 07
	(OTHER THAN PLEDGE		\$	\$37,521.37	
EXPENDITURE	3. TOTAL POLITICAL EXP	ENDITURES OF \$100 OR LESS, UNLESS ITEM	IZED		
TOTALS				\$	\$0.00
	4. TOTAL POLITICAL E	XPENDITURES			*******
				\$	\$44,033.78
CONTRIBUTION	5. TOTAL POLITICAL CON	ITRIBUTIONS MAINTAINED AS OF THE LAST D	AY OF THE	 	
BALANCE	REPORTING PERIOD			\$	\$41,640.51
OUTSTANDING		OUNT OF ALL OUTSTANDING LOANS AS OF THE	HE LAST		
LOAN TOTALS	DAY OF THE REPORTIN	NG PERIOD		\$	\$0.00
L6 AFFIDAVIT		l access as affirms consider a consider of a point	that the acc		
ME!	GAN LYNN POLANCO	I swear, or affirm, under penalty of perju and correct and includes al l inf ormation			
Notar	y Public, State of Texas	Title 15, Election Code.	_		
	m. Expires 05-10-2023				
The OF miles No	otary ID 132009128	Signature of Cam	paign Treasur	er	
	I SEAL ABOVE	- D	_		
Sworn to and subscribed		lames Kussell, thi	s the	STI) day
of October	, 20, to certify whic	h, witness my hand and seal of office.			
Whom Y	Lima Ydai	non Hosa al unnitida	madi	rost.	or of odl
Signature of officer ad	ministering oath Prir	nted name of officer administering oath	Title of office	er administe	ering oath
U since a		and the same of th	51 51110		

SUBTOTALS - SPAC

FORM SPAC **COVER SHEET PG 3**

3 of 10											
17 COMMITTEE N	17 COMMITTEE NAME PACE PAC 18 Filer ID										
19 SCHEDULE SU NAME OF SCH		SUBTOTAL AMOUNT									
1. X SO	CHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 37,521.37								
2. SC	CHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$								
3. Sc	CHEDULE B: PLEDGED CONTRIBUTIONS		\$								
	CHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO RGANIZATION	R	\$								
	CHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA ABOR ORGANIZATION	TION OR	\$								
6. SC	CHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	DRGANIZATION	\$								
7. SC	CHEDULE E: LOANS		\$								
8. X SC	CHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 44,033.78								
9. SC	CHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$								
10. SC	CHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$								
11. SC	CHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$								
12. SC	CHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$								
13. X SC	CHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$ 51.98								
14.	CHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F D FILER	RETURNED	\$								

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/10 2 FILER NAME 3 Filer ID PACE PAC 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 10/23/2019 C3 Presents, LLC \$30,000.00 6 Contributor address; City; State; Zip Code 1645 E 6th St #150 Austin, TX 78702 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 10/08/2019 Forefront Networks, LP \$5,000.00 Contributor address; City; State; Zip Code 411 Radam Ln Austin, TX 78745 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/25/2019 \$1,000.00 Graham, Daniel Contributor address; City; State; Zip Code 9309 Leaning Rock Cir Austin, TX 78730 Principal occupation / Job title (See Instructions) Employer (See Instructions) Founder **Notley Ventures** Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 10/12/2019 Riddles, Heath \$21.37 Contributor address; City; State; Zip Code 6202 Hickman Ave Unit B Austin, TX 78723 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/18/2019 \$1,500.00 Sellers, Tom Contributor address; City; State; Zip Code 3307 Perry Ln Austin, TX 78731 Employer (See Instructions) Principal occupation / Job title (See Instructions) Manager ConocoPhillips

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID	_
Sch: 1/5 Rpt: 5/10	PACE PAC	
4 Date	5 Payee name	
10/01/2019	Austin Chronicle	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,545.00	4000 N IH 35	
	Austin, TX 78751	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		
Date	D. D. C.	_
10/08/2019	Payee name Austin Chronicle	
Supported to the Committee of the Commit		_
Amount (\$)	Payee address; City; State; Zip Code	
\$1,545.00	4000 N IH 35	
	Austin, TX 78751	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Ad	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		
Date	Payee name	_
10/16/2019	Austin Chronicle	
Amount (\$)	Payee address; City; State; Zip Code	_
\$1,545.00	4000 N IH 35	
*=(=,:====		
	Austin, TX 78751	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
LXI LNDITORE	Check if Austin, TX, officeholder living expense	
	Ad	
Complete CAU V if dire-+	Condidate/Officeholder name Office cought	_
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
		_

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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 Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 2/5 Rpt: 6/10	2 FILER NAME PACE PAC
4	Date 10/23/2019	5 Payee name Austin Chronicle
6	Amount (\$) \$1,545.00	7 Payee address; City; State; Zip Code 4000 N IH 35
_		Austin, TX 78751
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ad
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date 10/16/2019	Payee name CheckMark Typesetting
	Amount (\$) \$4,245.64	Payee address; City; State; Zip Code 3217 N I 35 Austin, TX 78722
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Signs
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date 10/12/2019	Payee name Donateway
	Amount (\$) \$1.37	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation Site fee
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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 cate

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 3/5 Rpt: 7/10	2 FILER NAME PACE PAC
4	Date 10/02/2019	5 Payee name Littlefield Consulting
6	Amount (\$) \$328.73	7 Payee address; City; State; Zip Code 7705 Vail Valley Dr Austin, TX 78749
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sign
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 10/21/2019	Payee name M & G Sign Placement Services
	Amount (\$) \$4,635.00	Payee address; City; State; Zip Code 6410 Ponca St Austin, TX 78741
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sign placement
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 10/15/2019	Payee name Y Strategy
	Amount (\$) \$4,968.10	Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78723
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Pushcards
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense
Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Servi				Vages	se :/Contract Labor ete this form.		Travel Out of District OTHER (enter a category	not listed above)
1	Total pages Sabadula F1:	12	EII ED NAME							_	F11 - 15	
Ĺ	Total pages Schedule F1: Sch: 4/5 Rpt: 8/10	_	PACE PAC							3	Filer ID	
4	Date	5	Payee name									
L	10/25/2019		Y Strategy									
6	Amount (\$)	7	Payee addre	ss; C	ity;	State;	Zip Co	de				
	\$21,174.94		3110 Mano	r Rd								
			Ste H									
			Austin, TX	78723								
8	PURPOSE	(a)	Category (s.		a lintad at the		- d. d-V	(b)	Description	_		
ľ	OF	(")	Category (Se Printing Exp		is listed at the	top of this sche	edule)	(2)		outsi	de of Texas. Complete Sch	nedule T.
	EXPENDITURE		i ilitalig Exp	CHSC					_		officeholder living expense	
									Mail			
9	Complete ONLY if direct		Candidate/Offi	ceholder	name	C	office sou	ght			Office held	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	10/25/2019		Y Strategy									
	Amount (\$)		Payee addres	ss; C	ity;	State;	Zip Co	de				
	\$1,000.00		3110 Manor	Rd			•					
	,		Ste H									
			Austin, TX 7	79722								
_		_	2									
	PURPOSE OF	(a)	Category (Se			top of this sche	edule)	(b)	Description		J / T O	-11-
	EXPENDITURE		Advertising	Expense	Э				_		de of Texas. Complete Sch officeholder living expense	
									Graphic design		officeriolder living expense	•
									orapino acci	9.,		
_	Complete ONLY if direct		Candidate/Offi	ceholder	name	0	office sou	ght			Office held	
	expenditure to benefit C/OI	Н										
	Date	Γ	Payee name									
	10/25/2019		Y Strategy									
	Amount (\$)		Payee addres	ss; C	ity;	State;	Zip Co	de				
	\$1,000.00		3110 Manor	Rd								
			Ste H									
			Austin, TX 7	78723								
_	DUDDOOF	(-)	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					(1-)				
	PURPOSE OF	(a)	Category (Se			top of this sche	edule)	(a)	Description	outei	de of Texas. Complete Sch	nadula T
	EXPENDITURE		Advertising	Expense	9						officeholder living expense	
									Video		•	
_	Complete ONLY if direct		Candidate/Offic	ceholder	name	0	ffice sou	ght			Office held	
	expenditure to benefit C/O							3				

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment				Fees Food/Beverage Expens Gift/Awards/Memorials Legal Services	Expense	Polling Expens Printing Expen Salaries/Wage	se s/Contract Labor		Transportation Equipment & Related Expe Travel in District Travel Out of District OTHER (enter a category not listed above	
L		_		The Instruction Gu	uide explains	how to compl	ete this form.	_		
1	Total pages Schedule F1:	2						3	Filer ID	
	Sch: 5/5 Rpt: 9/10		PACE PAC							
4	Date	5	Payee name	9						
	10/25/2019		Y Strategy							
6	Amount (\$)	7	Payee addre	ess; City;	State	Zip Code				
	\$500.00		3110 Mano							
			Ste H							
			Austin, TX	70722						
L		L								
8	PURPOSE OF	(a		See Categories listed at the		edule) (b)	Description			
	EXPENDITURE		Solicitation	/Fundraising Exp	ense				e of Texas. Complete Schedule T. officeholder living expense	
							Compliance	1, 17, 0	miceriolder living expense	
							Compilarios			
_	Complete ONLY if direct		Candidate/Off	ficeholder name		Office sought			Office held	
9	expenditure to benefit C/Ol	н '	Sanuluate/On	ncenoider name	,	Jilice Sought			Office field	
\vdash		_								

SCHEDULE I

			The Instruction Guide explains how to complete this form.
1	Total pages Schedule I: Sch: 1/1 Rpt:	2	FILER NAME PACE PAC 3 Filer ID
4	Date 10/23/2019	5	Payee name Harland Clarke
6	Amount (\$) 51.98	7	Payee Address; City; State; Zip 15955 La Cantera Pkwy San Antonio, TX 78256
8	PURPOSE OF EXPENDITURE	(a)	Category (See instructions for examples of acceptable categories) (b) Description Checks (See instructions regarding type of information required.)
			·