

# 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 (Ethics Commission Filers) 00090476	2 Total pages filed: 27
3 COMMITTEE NAME Our Mobility Our Future			<b>OFFICE USE ONLY</b> Date Received ELECTRONICALLY FILED 10/05/2020 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 6020  Austin, TX 78762		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Baylor NICKNAME LAST SUFFIX A. Jo		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1101 Navasota #2 Austin, TX 78702		
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE TX		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 413-4276		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 Limit <input type="checkbox"/> July 15 <input 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 07/01/2020      THROUGH      09/24/2020		
11 ELECTION	ELECTION DATE Month Day Year 11/03/2020	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

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# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **SPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Our Mobility Our Future		<b>13 Filer ID</b> (Ethics Commission Filers) 00090476		
<b>14 COMMITTEE PURPOSE</b>  (Attach lists on plain paper to complete this report if necessary.)  <input type="checkbox"/> SUPPORT (Candidate or Measure)  <input checked="" type="checkbox"/> OPPOSE (Candidate or Measure)  <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate  <input type="checkbox"/> Officeholder	<b>CANDIDATE / OFFICEHOLDER NAME</b>		
		<b>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</b>		
	<input checked="" type="checkbox"/> Measure	<b>BALLOT IDENTIFICATION / #</b>		<b>ELECTION DATE</b> Month    Day    Year 11/03/2020
		<b>DESCRIPTION</b> City of Austin Tax Rate Election - Proposition A		
<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED</b>		\$            0.00	
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$            276,355.00	
<b>EXPENDITURE TOTALS</b>	<b>3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED</b>		\$            0.00	
	<b>4. TOTAL POLITICAL EXPENDITURES</b>		\$            87,603.95	
<b>CONTRIBUTION BALANCE</b>	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>		\$            240,704.58	
<b>OUTSTANDING LOAN TOTALS</b>	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>		\$            0.00	

<b>16 AFFIDAVIT</b>  <div style="text-align: right;">         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.       </div> <div style="text-align: right; margin-top: 20px;">         Baylor A. Jo          _____          Signature of Campaign Treasurer       </div> <div style="text-align: center; margin-top: 20px;">         AFFIX NOTARY STAMP / SEAL ABOVE       </div> <div style="margin-top: 20px;">         Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.       </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div>         _____          Signature of officer administering oath       </div> <div>         _____          Printed name of officer administering oath       </div> <div>         _____          Title of officer administering oath       </div> </div>		
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**SUBTOTALS - SPAC****FORM SPAC**  
**COVER SHEET PG 3**  
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<b>17</b> COMMITTEE NAME Our Mobility Our Future		<b>18</b> Filer ID (Ethics Commission Filers) 00090476
<b>19</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 217,355.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 8,900.00
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 59,000.00
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 87,603.95
9.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
14.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/13 Rpt: 4/27
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 09/10/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Dick <hr/> <b>6</b> Contributor address; City; State; Zip Code 3700 N Capital of Texas Hwy Ste 420 Austin, TX 78746	<b>7</b> Amount of Contribution (\$) \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate		<b>9</b> Employer (See Instructions) HPI
Date 09/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Kevin <hr/> Contributor address; City; State; Zip Code 7812 Harvestman Cv Austin, TX 78731	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Customized Energy Solutions
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Richard <hr/> Contributor address; City; State; Zip Code 3700 North Capital of Texas Hwy ste 420 Austin, TX 78746	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Self-Employed
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aune, Jon Carson <hr/> Contributor address; City; State; Zip Code 375 King Arthur Ct Austin, TX 78746	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-Employed
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ball, Dana <hr/> Contributor address; City; State; Zip Code 2610 Allston Lane Austin, TX 78746	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/13 Rpt: 5/27
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 08/31/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnard, Hayes <hr/> <b>6</b> Contributor address; City; State; Zip Code 440 Ridge Road  Tiburon, CA 94920	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Founder		<b>9</b> Employer (See Instructions) Loanpal
Date 09/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Alan <hr/> Contributor address; City; State; Zip Code 7706 Stoneywood Drive  Austin, TX 78731	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barron, Michael <hr/> Contributor address; City; State; Zip Code 4304 Long Champ Drive  Austin, TX 78746	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Attorney and Real Estate Consultant		Employer (See Instructions) Self-Employed
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Joel <hr/> Contributor address; City; State; Zip Code 1404 Foxtail Cove  Austin, TX 78704	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Attorney & Property Owner		Employer (See Instructions) Joel B. Bennett PC
Date 09/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birdsall, Paul <hr/> Contributor address; City; State; Zip Code 11804 Whitewing Ave  Austin, TX 78753	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/13 Rpt: 6/27
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 08/13/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolton, David <hr/> <b>6</b> Contributor address; City; State; Zip Code 3103 Bee Caves Rd ste 225 Austin, TX 78746	<b>7</b> Amount of Contribution (\$) \$2,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Consulting		<b>9</b> Employer (See Instructions) Bolton Real Estate
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, James <hr/> Contributor address; City; State; Zip Code 1307 Kinney Ave apt 140 Austin, TX 78704	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadus, Bill <hr/> Contributor address; City; State; Zip Code 8514 Lime Creek Rd  Volente, TX 78641	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Service Station Owner		Employer (See Instructions) Self-Employed
Date 08/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brunson, Leigh Ann <hr/> Contributor address; City; State; Zip Code 1409 Braided Rope Drive  Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrow, Janis <hr/> Contributor address; City; State; Zip Code 5515 Balcones Drive  Austin, TX 78731	Amount of Contribution (\$) \$4,500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/13 Rpt: 7/27
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 09/24/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code 222 West Ave  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Winstead PC
Date 08/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calvert, Stanton <hr/> Contributor address; City; State; Zip Code 3913 Greystone Drive  Austin, TX 78731	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantrell, Craig <hr/> Contributor address; City; State; Zip Code 8310 N Capital of Texas Hwy Ste 2-300 Austin, TX 78731	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) COO & Co-Founder		Employer (See Instructions) Breakingpoint Systems Inc
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Tommy <hr/> Contributor address; City; State; Zip Code 250 Colonial Affair  Austin, TX 78737	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) Carlson, Brigrance & Doering
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotton, Jim <hr/> Contributor address; City; State; Zip Code 11000 Spicewood Pkwy  Austin, TX 78750	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Real Estate Investment		Employer (See Instructions) Self-Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/13 Rpt: 8/27
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 09/03/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Todd <hr/> <b>6</b> Contributor address; City; State; Zip Code Lemen's Spice Trail Austin, TX 78750	<b>7</b> Amount of Contribution (\$) \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/27/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elia, Tom <hr/> Contributor address; City; State; Zip Code 309 E 35th St Austin, TX 78705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Commercial Cleaner		Employer (See Instructions) Self-Employed
Date 09/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Chris <hr/> Contributor address; City; State; Zip Code 1702 Channel Road Austin, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Endeavor
Date 08/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Mark <hr/> Contributor address; City; State; Zip Code 98 San Jacinto Blvd Unit FSR 2501 Austin, TX 78701	Amount of Contribution (\$) \$20,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Douglas <hr/> Contributor address; City; State; Zip Code 3345 Bee Cave Rd Ste 205 Austin, TX 78746	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Real Estate Investment		Employer (See Instructions) Self-Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/13 Rpt: 9/27
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 09/09/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Head, Ray <hr/> <b>6</b> Contributor address; City; State; Zip Code 4210 Spicewood Springs Rd #211 Austin, TX 78759	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Consultant		<b>9</b> Employer (See Instructions) Self-Employed
Date 08/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston, Sam <hr/> Contributor address; City; State; Zip Code 3700 N Capital of Texas Hwy Suite 420 Austin, TX 78746	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Self-Employed
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jordon <hr/> Contributor address; City; State; Zip Code 201 Barton Springs Road  Austin, TX 78704	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) McAllister & Associates
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Steve <hr/> Contributor address; City; State; Zip Code 19108 Excursion Falls Way  Leander, TX 78645	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) City Manager		Employer (See Instructions) Jonestown
Date 07/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kent, Taylor <hr/> Contributor address; City; State; Zip Code 900 Congress Ave Suite L 165 Austin, TX 78701	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Taylor Commercial Real Estate		Employer (See Instructions) Founder & Owner

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/13 Rpt: 10/27
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 08/17/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kochwelp, William <hr/> <b>6</b> Contributor address; City; State; Zip Code 10101 Eastman Cove  Austin, TX 78750	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Investment		<b>9</b> Employer (See Instructions) Self-Employed
Date 08/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kozuh, Joseph <hr/> Contributor address; City; State; Zip Code 3839 Dry Creek Drive Condo 136 Austin, TX 78731	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuznieski, Nancy <hr/> Contributor address; City; State; Zip Code 7604 Mifflin Kennedy Terrace  Austin, TX 78749	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Insurance Broker		Employer (See Instructions) Nancy Kuznieski Insurance
Date 09/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuznieski, Nancy <hr/> Contributor address; City; State; Zip Code 2312 Western Trails Blvd ste 102B Austin, TX 78745	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Insurance Broker		Employer (See Instructions) Nancy Kuznieski Insurance
Date 08/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Michael <hr/> Contributor address; City; State; Zip Code PO Box 146  Austin, TX 78767	Amount of Contribution (\$)  \$33,100.00
Principal occupation / Job title (See Instructions) Founder and Retired Publisher		Employer (See Instructions) Texas Monthly

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/13 Rpt: 11/27
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 08/20/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loewy, Adam <b>6</b> Contributor address; City; State; Zip Code 6812 Valburn Dr Austin, TX 78731	<b>7</b> Amount of Contribution (\$) \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Private Attorney		<b>9</b> Employer (See Instructions) Self-Employed
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marco, Albert Contributor address; City; State; Zip Code 201 W Howard Ln Austin, TX 78753	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Principal Founder		Employer (See Instructions) Casa Marco Management
Date 07/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCall, John Contributor address; City; State; Zip Code PO Box 633 Spicewood, TX 78669	Amount of Contribution (\$) \$24,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormack, John Contributor address; City; State; Zip Code 1510 Rainbow Bnd Austin, TX 78703	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McHale, John Contributor address; City; State; Zip Code 5007 Timberline Austin, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/13 Rpt: 12/27
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 08/25/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, William <hr/> <b>6</b> Contributor address; City; State; Zip Code 1 Brett Cove Austin, TX 78746	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Self		<b>9</b> Employer (See Instructions) William F. Moore
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nehrkorn, Craig <hr/> Contributor address; City; State; Zip Code Tecate Trail Austin, TX 78739	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Robotics		Employer (See Instructions) NA
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLeary, Mark <hr/> Contributor address; City; State; Zip Code 5904 Republic of Texas Blvd Austin, TX 78735	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Insurance Consultant		Employer (See Instructions) Private Practice
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pence, Bert <hr/> Contributor address; City; State; Zip Code 708 Rio Grande St Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-Employed
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Kevin <hr/> Contributor address; City; State; Zip Code 4309 Airport Blvd Unit A Austin, TX 78722	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/13 Rpt: 13/27
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 07/07/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Roger <hr/> <b>6</b> Contributor address; City; State; Zip Code 2750 NE 23rd St  Pompeo Beach, FL 33062	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 07/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Vicki <hr/> Contributor address; City; State; Zip Code 3201 Aztec Fall Cove  Austin, TX 78746	Amount of Contribution (\$)  \$50,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roche, David <hr/> Contributor address; City; State; Zip Code 1600 Mount Larson Rd  Austin, TX 78746	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-Employed
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruehlman, David <hr/> Contributor address; City; State; Zip Code 1605 Twilight Ridge Drive  Austin, TX 78746	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Landscaping		Employer (See Instructions) Self-Employed
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Robert <hr/> Contributor address; City; State; Zip Code 4811 Palisade Drive  Austin, TX 78731	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Hexadyne Corp

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/13 Rpt: 14/27
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 09/24/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Satterlee, Kenneth <hr/> <b>6</b> Contributor address; City; State; Zip Code 901 S Mopac Expy Building 1, Ste 160 Austin, TX 78746	<b>7</b> Amount of Contribution (\$) \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate		<b>9</b> Employer (See Instructions) Self-Employed
Date 09/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Stuart <hr/> Contributor address; City; State; Zip Code 6009 Eleos Circle Austin, TX 78735	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Real Estate Developer		Employer (See Instructions) Self-Employed
Date 08/27/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shive, James <hr/> Contributor address; City; State; Zip Code 6505 Auburndale St Austin, TX 78723	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spatz, David <hr/> Contributor address; City; State; Zip Code 694 Windsong Trail Austin, TX 78746	Amount of Contribution (\$) \$4,000.00
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Self-Employed
Date 07/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanner, Gary <hr/> Contributor address; City; State; Zip Code 812 Stonewall Ridge Lane Austin, TX 78746	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/13 Rpt: 15/27
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 08/26/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Winkle, Carl <hr/> <b>6</b> Contributor address; City; State; Zip Code 8112 Tahoe Parke Cir Austin, TX 78726	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vo, Kuantan <hr/> Contributor address; City; State; Zip Code 809 Screech Owl Dr Pflugerville, TX 78660	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Abrigo
Date 09/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welp, Mark <hr/> Contributor address; City; State; Zip Code 108 Barefoot Cove Austin, TX 78730	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson III, Desmond <hr/> Contributor address; City; State; Zip Code 3209 Aztec Fall Cove Austin, TX 78746	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Ellen <hr/> Contributor address; City; State; Zip Code 5002 Sevan Cove Austin, TX 78731	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) VCFO, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 13/13 Rpt: 16/27

2 FILER NAME

Our Mobility Our Future

3 Filer ID (Ethics Commission Filers)  
00090476

4 Date

07/31/2020

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Zito, Paul

7 Amount of Contribution (\$)

\$2,500.00

6 Contributor address; City; State; Zip Code

4445 River Garden Trl

Austin, TX 78746

8 Principal occupation / Job title (See Instructions)

MD

9 Employer (See Instructions)

Ascension Medical Group



# PLEDGED CONTRIBUTIONS

## SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:  
Sch: 1/1 Rpt: 17/27

2 FILER NAME  
Our Mobility Our Future

3 Filer ID (Ethics Commission Filers)  
00090476

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date  
  
09/24/2020

6 Full name of pledgor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Levy, Michael  
7 Pledgor Address; City; State; Zip Code  
PO Box 146  
  
Austin, TX 78767

8 Amount of  
pledge (\$)  
\$8,900.00

9 In-kind description  
(If applicable)

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

10 Principal occupation / Job title (See Instructions)  
Founder and Retired Publisher

11 Employer (See Instructions)  
Texas Monthly

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

**SCHEDULE C1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C1: Sch: 1/4 Rpt: 18/27
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 07/31/2020	<b>5</b> Corporation / Labor Organization name 3 T & Y Partners, Ltd. <hr/> <b>6</b> Corporation / Labor Organization address; City; State; Zip Code 5100 Hwy 290 West Bldg 2, Suite 200 Austin, TX 78735	<b>7</b> Amount of contribution (\$) \$1,000.00
Date 07/24/2020	Corporation / Labor Organization name 5900-2 Shepherd Mountain Cove LLC <hr/> Corporation / Labor Organization address; City; State; Zip Code 1717 W. 6th Street Suite 400 Austin, TX 78703	Amount of contribution (\$) \$5,000.00
Date 09/09/2020	Corporation / Labor Organization name Bicar Family Holdings LLC <hr/> Corporation / Labor Organization address; City; State; Zip Code 2402 Rockmoor Ave  Austin, TX 78703	Amount of contribution (\$) \$1,000.00
Date 07/09/2020	Corporation / Labor Organization name Brown Distributing Company <hr/> Corporation / Labor Organization address; City; State; Zip Code 8711 Johnny Morris Rd  Austin, TX 78724	Amount of contribution (\$) \$10,000.00
Date 09/15/2020	Corporation / Labor Organization name Brown Distributing Company <hr/> Corporation / Labor Organization address; City; State; Zip Code 8711 Johnny Morris Rd  Austin, TX 78724	Amount of contribution (\$) \$10,000.00
Date 07/31/2020	Corporation / Labor Organization name Commerce NE 1800 LLC <hr/> Corporation / Labor Organization address; City; State; Zip Code 5100 Hwy 290 West Bldg 2, Suite 200 Austin, TX 78735	Amount of contribution (\$) \$1,000.00
Date 07/31/2020	Corporation / Labor Organization name Court 2000 Ltd <hr/> Corporation / Labor Organization address; City; State; Zip Code 5100 Hwy 290 West Bldg 2, Suite 200 Austin, TX 78735	Amount of contribution (\$) \$1,000.00

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

**SCHEDULE C1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C1: Sch: 2/4 Rpt: 19/27
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 07/29/2020	<b>5</b> Corporation / Labor Organization name DPS Georgetown 2000 LLC <hr/> <b>6</b> Corporation / Labor Organization address; City; State; Zip Code 5100 Hwy 290 West Bldg 2 Suite 200 Austin, TX 78735	<b>7</b> Amount of contribution (\$) \$1,000.00
Date 07/29/2020	Corporation / Labor Organization name Dime 2000 Ltd <hr/> Corporation / Labor Organization address; City; State; Zip Code 5100 Hwy 290 West Bldg 2, Ste 2 Austin, TX 78735	Amount of contribution (\$) \$1,000.00
Date 07/29/2020	Corporation / Labor Organization name Eagle 2000 II, Ltd <hr/> Corporation / Labor Organization address; City; State; Zip Code 510 West 15th Street  Austin, TX 78701	Amount of contribution (\$) \$1,000.00
Date 07/31/2020	Corporation / Labor Organization name FIX 2000 LLC <hr/> Corporation / Labor Organization address; City; State; Zip Code 5100 Hwy 290 West Bldg 2, Suite 200 Austin, TX 78735	Amount of contribution (\$) \$1,000.00
Date 07/31/2020	Corporation / Labor Organization name HEAVY 2000, LTD. <hr/> Corporation / Labor Organization address; City; State; Zip Code 510 West 15th Street  Austin, TX 78701	Amount of contribution (\$) \$1,000.00
Date 09/24/2020	Corporation / Labor Organization name Kruger Jewelry Co., Inc. of Austin <hr/> Corporation / Labor Organization address; City; State; Zip Code 722 Congress Ave  Austin, TX 78701	Amount of contribution (\$) \$500.00
Date 07/31/2020	Corporation / Labor Organization name Lastlot 2000 Ltd <hr/> Corporation / Labor Organization address; City; State; Zip Code 5100 Hwy 290 West Bldg 2, Suite 200 Austin, TX 78735	Amount of contribution (\$) \$1,000.00

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

**SCHEDULE C1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C1: Sch: 3/4 Rpt: 20/27
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 08/28/2020	<b>5</b> Corporation / Labor Organization name Mesa Plaza LTD <hr/> <b>6</b> Corporation / Labor Organization address; City; State; Zip Code PO Box 161507  Austin, TX 78716	<b>7</b> Amount of contribution (\$) \$2,000.00
Date 08/20/2020	Corporation / Labor Organization name NL Land Holdings / 2309 Howard Lane <hr/> Corporation / Labor Organization address; City; State; Zip Code 3839 Bee Cave Rd Suite 204 Austin, TX 78746	Amount of contribution (\$) \$2,500.00
Date 07/31/2020	Corporation / Labor Organization name Pfluger JV I, Ltd <hr/> Corporation / Labor Organization address; City; State; Zip Code 5100 Hwy 290 West Bldg 2, Suite 200 Austin, TX 78735	Amount of contribution (\$) \$1,000.00
Date 07/29/2020	Corporation / Labor Organization name Pickroy 2000 LLC <hr/> Corporation / Labor Organization address; City; State; Zip Code 5100 Hwy 290 West Bldg 2 Suite 200 Austin, TX 78735	Amount of contribution (\$) \$1,000.00
Date 07/31/2020	Corporation / Labor Organization name Pique 2000 Ltd <hr/> Corporation / Labor Organization address; City; State; Zip Code 5100 Hwy 290 West Bldg 2, Suite 200 Austin, TX 78735	Amount of contribution (\$) \$1,000.00
Date 07/29/2020	Corporation / Labor Organization name Remark 2000 Ltd <hr/> Corporation / Labor Organization address; City; State; Zip Code 5100 Hwy 290 West Bldg 2 Suite 200 Austin, TX 78735	Amount of contribution (\$) \$1,000.00
Date 09/22/2020	Corporation / Labor Organization name Roger Beasley Mazda South <hr/> Corporation / Labor Organization address; City; State; Zip Code 4506 S. IH-35  Austin, TX 78745	Amount of contribution (\$) \$10,000.00

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 4/4 Rpt: 21/27
2 FILER NAME Our Mobility Our Future		3 Filer ID (Ethics Commission Filers) 00090476
4 Date 07/29/2020	5 Corporation / Labor Organization name TADA BUILDING, LP	7 Amount of contribution (\$) \$1,000.00
	6 Corporation / Labor Organization address; City; State; Zip Code 510 West 15th Street  Austin, TX 78701	
Date 07/29/2020	Corporation / Labor Organization name TDCJ 2000 LLC	Amount of contribution (\$) \$1,000.00
	Corporation / Labor Organization address; City; State; Zip Code 5100 Hwy 290 West Bldg 2, Suite 200 Austin, TX 78735	
Date 08/28/2020	Corporation / Labor Organization name Westlake Medical of Austin LTD	Amount of contribution (\$) \$1,500.00
	Corporation / Labor Organization address; City; State; Zip Code PO Box 161507  Austin, TX 78716	
Date 08/28/2020	Corporation / Labor Organization name Westlake Medical of Austin LTD Phase II	Amount of contribution (\$) \$1,500.00
	Corporation / Labor Organization address; City; State; Zip Code PO Box 161507  Austin, TX 78716	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/6 Rpt: 22/27	<b>2</b> FILER NAME Our Mobility Our Future	<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 08/31/2020	<b>5</b> Payee name Austin American-Statesman	
<b>6</b> Amount (\$) \$11,000.00	<b>7</b> Payee address; City; State; Zip Code 305 S Congress Ave  Austin, TX 78704	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2-page spread, Sunday edition, Oct 11
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/14/2020	Payee name Borgelt, Roger	
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 614 S. Capital of Texas Hwy  Austin, TX 78746	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Legal Services	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal - July
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/18/2020	Payee name Cahn, Adam	
Amount (\$) \$800.00	Payee address; City; State; Zip Code 1401 Wickersham Ln  Austin, TX 78741	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Copywriting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/6 Rpt: 23/27	<b>2</b> FILER NAME Our Mobility Our Future	<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 08/04/2020	<b>5</b> Payee name Community Impact	
<b>6</b> Amount (\$) \$17,600.00	<b>7</b> Payee address; City; State; Zip Code 16225 Impact Way #1 Pflugerville, TX 78660	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 3-issue, 2-page spread print ad
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/03/2020	Payee name Falk, Roger	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 5904 Sierra Madre  Austin, TX 78759	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for audio equipment
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/11/2020	Payee name Flexicodes	
Amount (\$) \$132.00	Payee address; City; State; Zip Code 18650 W. Old US 12 1 Chelsea, MI 48118	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hosting fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/6 Rpt: 24/27	<b>2</b> FILER NAME Our Mobility Our Future	<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 08/17/2020	<b>5</b> Payee name Moonshot Marketers LLC	
<b>6</b> Amount (\$) \$5,000.00	<b>7</b> Payee address; City; State; Zip Code 1230 E 38th And Half St B  Austin, TX 78702	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital marketing automation
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/16/2020	Payee name Moreland Consulting	
Amount (\$) \$6,400.00	Payee address; City; State; Zip Code 5202 Woodmoor Dr  Austin, TX 78721	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/12/2020	Payee name Moreland Consulting	
Amount (\$) \$6,890.00	Payee address; City; State; Zip Code 5202 Woodmoor Dr  Austin, TX 78721	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/6 Rpt: 25/27	<b>2</b> FILER NAME Our Mobility Our Future	<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 09/08/2020	<b>5</b> Payee name Moreland Consulting	
<b>6</b> Amount (\$) \$4,677.45	<b>7</b> Payee address; City; State; Zip Code 5202 Woodmoor Dr  Austin, TX 78721	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/19/2020	Payee name Peel, Inc.	
Amount (\$) \$4,400.00	Payee address; City; State; Zip Code 1405 Brandi Ln  Round Rock, TX 78681	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense neighborhood newsletters 2-page print ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/24/2020	Payee name Pinpoint Action, LLC	
Amount (\$) \$650.00	Payee address; City; State; Zip Code 280 Wekiva Springs Road  Longwood, FL 32779	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital & phones
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/6 Rpt: 26/27	<b>2</b> FILER NAME Our Mobility Our Future	<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 09/10/2020	<b>5</b> Payee name Pinpoint Action, LLC	
<b>6</b> Amount (\$) \$2,598.40	<b>7</b> Payee address; City; State; Zip Code 280 Wekiva Springs Road  Longwood, FL 32779	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital & phones
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/29/2020	Candidate/Officeholder name Office sought Office held	
Payee name Thumos, LLC		
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 3900 Old Cheney Rd Suite 201 Lincoln, NE 68516	
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 Data scraping
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/01/2020	Candidate/Officeholder name Office sought Office held	
Payee name Thumos, LLC		
Amount (\$) \$991.10	Payee address; City; State; Zip Code 3900 Old Cheney Rd Suite 201 Lincoln, NE 68516	
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 Data scraping
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/6 Rpt: 27/27	<b>2</b> FILER NAME Our Mobility Our Future	<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 08/20/2020	<b>5</b> Payee name Waterloo Media	
<b>6</b> Amount (\$) \$5,054.00	<b>7</b> Payee address; City; State; Zip Code 8309 N Interstate Hwy 35  Austin, TX 78753	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Radio ad
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/20/2020	Payee name the polling company inc.	
Amount (\$) \$17,461.00	Payee address; City; State; Zip Code 2850 Eisenhower Avenue 1st Floor Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Austin Voter Survey
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held