

# Report of Direct Campaign Expenditures:ATX.1 COVERSHEET

1 INDIVIDUAL OR ORGANIZATION NAME	TITLE; FIRST; MI	PAGE # 81		
	LAST; SUFFIX Our Mobility Our Future	ACCOUNT # 00090476		
2 INDIVIDUAL OR ORGANIZATION ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 6020		Date Received ELECTRONICALLY FILED 10/20/2020	
	Austin, TX 78762		Receipt #	
	<input type="checkbox"/> (CHECK IF FILER'S HOME ADDRESS)		HD / PM	Amount
	3 INDIVIDUAL FILER EMPLOYER & OCCUPATION		Date Processed	
4 COMMITTEE TREASURER NAME	TITLE; FIRST; MI; LAST; SUFFIX		Date Imaged	
	Baylor  A. Jo			
5 COMMITTEE TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1101 Navasota, #2  Austin, TX 78702			

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 1/51 Rpt: 2/81
<b>4</b> PAYEE NAME	LAST FIRST MI Moreland Consulting		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  5202 Woodmoor Dr  Austin, TX 78721		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Consulting Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 02/15/2020	<b>(d)</b> Amount (\$) \$6,427.20	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 2/51 Rpt: 3/81
<b>4</b> PAYEE NAME	LAST FIRST MI Moreland Consulting		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  5202 Woodmoor Dr  Austin, TX 78721		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Consulting Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 03/02/2020	<b>(d)</b> Amount (\$) \$6,000.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 3/51 Rpt: 4/81
<b>4</b> PAYEE NAME	LAST FIRST MI Flexicodes		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  18650 W. Old US 12 1  Chelsea, MI 48118		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 03/09/2020	<b>(d)</b> Amount (\$) \$5,000.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 4/51 Rpt: 5/81
<b>4</b> PAYEE NAME	LAST FIRST MI Bronson, Jonathan		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  3809 Rockledge D  Austin, TX 78731		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Salaries/Wages/Contract Labor	<b>(b)</b> Description	
	<b>(c)</b> Date 03/15/2020	<b>(d)</b> Amount (\$) \$1,000.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 5/51 Rpt: 6/81
<b>4</b> PAYEE NAME	LAST FIRST MI Borgelt, Roger		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  614 S. Capital of Texas Hwy  Austin, TX 78746		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Legal Services	<b>(b)</b> Description	
	<b>(c)</b> Date 04/01/2020	<b>(d)</b> Amount (\$) \$850.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 6/51 Rpt: 7/81
<b>4</b> PAYEE NAME	LAST FIRST MI Moreland Consulting		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  5202 Woodmoor Dr  Austin, TX 78721		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Consulting Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 04/01/2020	<b>(d)</b> Amount (\$) \$6,000.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 7/51 Rpt: 8/81
<b>4</b> PAYEE NAME	LAST FIRST MI Shack, Edward		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  4410 Bellvue Ave  Austin, TX 78756		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Legal Services	<b>(b)</b> Description	
	<b>(c)</b> Date 03/07/2020	<b>(d)</b> Amount (\$) \$350.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 8/51 Rpt: 9/81
<b>4</b> PAYEE NAME	LAST FIRST MI Bronson, Jonathan		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  3809 Rockledge D  Austin, TX 78731		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Salaries/Wages/Contract Labor	<b>(b)</b> Description	
	<b>(c)</b> Date 04/15/2020	<b>(d)</b> Amount (\$) \$1,000.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 9/51 Rpt: 10/81
<b>4</b> PAYEE NAME	LAST FIRST MI Moreland Consulting		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  5202 Woodmoor Dr  Austin, TX 78721		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Consulting Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 05/06/2020	<b>(d)</b> Amount (\$) \$3,795.75	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 10/51 Rpt: 11/81
<b>4</b> PAYEE NAME	LAST FIRST MI Magnuson, Dillon		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  513 S Park Dr Unit #304  Austin, TX 78704		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Salaries/Wages/Contract Labor	<b>(b)</b> Description	
	<b>(c)</b> Date 05/12/2020	<b>(d)</b> Amount (\$) \$243.52	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 11/51 Rpt: 12/81
<b>4</b> PAYEE NAME	LAST FIRST MI Voices of Austin		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  108 Wild Basin Rd S Unit 250  Austin, TX 78746		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Other	<b>(b)</b> Description Contributions/Donations Made By Candidate/Officeholder/Political Committee	
	<b>(c)</b> Date 05/27/2020	<b>(d)</b> Amount (\$) \$5,000.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 12/51 Rpt: 13/81
<b>4</b> PAYEE NAME	LAST FIRST MI Lewis, John		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  3839 Bee Cave Rd Suite 204  Austin, TX 78746		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Other	<b>(b)</b> Description Donation Partial Refund	
	<b>(c)</b> Date 06/02/2020	<b>(d)</b> Amount (\$) \$5,000.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 13/51 Rpt: 14/81
<b>4</b> PAYEE NAME	LAST FIRST MI Moreland Consulting		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  5202 Woodmoor Dr  Austin, TX 78721		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Consulting Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 06/02/2020	<b>(d)</b> Amount (\$) \$6,000.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 14/51 Rpt: 15/81
<b>4</b> PAYEE NAME	LAST FIRST MI Moreland Consulting		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  5202 Woodmoor Dr  Austin, TX 78721		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Consulting Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 07/16/2020	<b>(d)</b> Amount (\$) \$6,400.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 15/51 Rpt: 16/81
<b>4</b> PAYEE NAME	LAST FIRST MI Thumos, LLC		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  3900 Old Cheney Rd Suite 201  Lincoln, NE 68516		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 07/29/2020	<b>(d)</b> Amount (\$) \$2,500.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 16/51 Rpt: 17/81
<b>4</b> PAYEE NAME	LAST FIRST MI Moreland Consulting		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  5202 Woodmoor Dr  Austin, TX 78721		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Consulting Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 08/12/2020	<b>(d)</b> Amount (\$) \$6,890.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 17/51 Rpt: 18/81
<b>4</b> PAYEE NAME	LAST FIRST MI Community Impact		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  16225 Impact Way #1  Pflugerville, TX 78660		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 08/04/2020	<b>(d)</b> Amount (\$) \$17,600.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 18/51 Rpt: 19/81
<b>4</b> PAYEE NAME	LAST FIRST MI Moonshot Marketers LLC		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  1230 E 38th And Half St B  Austin, TX 78702		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 08/17/2020	<b>(d)</b> Amount (\$) \$5,000.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 19/51 Rpt: 20/81
<b>4</b> PAYEE NAME	LAST FIRST MI Cahn, Adam		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  1401 Wickersham Ln  Austin, TX 78741		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Salaries/Wages/Contract Labor	<b>(b)</b> Description	
	<b>(c)</b> Date 08/18/2020	<b>(d)</b> Amount (\$) \$800.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 20/51 Rpt: 21/81
<b>4</b> PAYEE NAME	LAST FIRST MI Flexicodes		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  18650 W. Old US 12 1  Chelsea, MI 48118		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 08/11/2020	<b>(d)</b> Amount (\$) \$132.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 21/51 Rpt: 22/81
<b>4</b> PAYEE NAME	LAST FIRST MI Waterloo Media		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  8309 N Interstate Hwy 35  Austin, TX 78753		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 08/20/2020	<b>(d)</b> Amount (\$) \$5,054.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 22/51 Rpt: 23/81
<b>4</b> PAYEE NAME	LAST FIRST MI Pinpoint Action, LLC		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  280 Wekiva Springs Road  Longwood, FL 32779		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 08/24/2020	<b>(d)</b> Amount (\$) \$650.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 23/51 Rpt: 24/81
<b>4</b> PAYEE NAME	LAST FIRST MI Peel, Inc.		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  1405 Brandi Ln  Round Rock, TX 78681		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 08/19/2020	<b>(d)</b> Amount (\$) \$4,400.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 24/51 Rpt: 25/81
<b>4</b> PAYEE NAME	LAST FIRST MI Austin American-Statesman		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  305 S Congress Ave  Austin, TX 78704		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 08/31/2020	<b>(d)</b> Amount (\$) \$11,000.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 25/51 Rpt: 26/81
<b>4</b> PAYEE NAME	LAST FIRST MI Thumos, LLC		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  3900 Old Cheney Rd Suite 201  Lincoln, NE 68516		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 09/01/2020	<b>(d)</b> Amount (\$) \$991.10	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future	<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 26/51 Rpt: 27/81
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<b>4</b> PAYEE NAME	LAST FIRST MI Borgelt, Roger
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<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  614 S. Capital of Texas Hwy  Austin, TX 78746
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<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Legal Services	<b>(b)</b> Description
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	<b>(c)</b> Date 08/14/2020	<b>(d)</b> Amount (\$) \$1,250.00
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<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)
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	<b>(c)</b> Office sought	<b>(d)</b> Office held
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# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future	<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 27/51 Rpt: 28/81
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<b>4</b> PAYEE NAME	LAST FIRST MI the polling company inc.
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<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  2850 Eisenhower Avenue 1st Floor  Alexandria, VA 22314
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<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Polling Expense	<b>(b)</b> Description
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	<b>(c)</b> Date 08/20/2020	<b>(d)</b> Amount (\$) \$17,461.00
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<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)
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	<b>(c)</b> Office sought	<b>(d)</b> Office held
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# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 28/51 Rpt: 29/81
<b>4</b> PAYEE NAME	LAST FIRST MI Moreland Consulting		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  5202 Woodmoor Dr  Austin, TX 78721		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Consulting Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 09/08/2020	<b>(d)</b> Amount (\$) \$4,677.45	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 29/51 Rpt: 30/81
<b>4</b> PAYEE NAME	LAST FIRST MI Pinpoint Action, LLC		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  280 Wekiva Springs Road  Longwood, FL 32779		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 09/10/2020	<b>(d)</b> Amount (\$) \$2,598.40	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 30/51 Rpt: 31/81
<b>4</b> PAYEE NAME	LAST FIRST MI Borgelt, Roger		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  614 S. Capital of Texas Hwy  Austin, TX 78746		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Legal Services	<b>(b)</b> Description	
	<b>(c)</b> Date 09/03/2020	<b>(d)</b> Amount (\$) \$200.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 31/51 Rpt: 32/81
<b>4</b> PAYEE NAME	LAST FIRST MI Pinpoint Action, LLC		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  280 Wekiva Springs Road  Longwood, FL 32779		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 09/25/2020	<b>(d)</b> Amount (\$) \$2,820.20	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 32/51 Rpt: 33/81
<b>4</b> PAYEE NAME	LAST FIRST MI Pinpoint Action, LLC		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  280 Wekiva Springs Road  Longwood, FL 32779		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 09/25/2020	<b>(d)</b> Amount (\$) \$22,452.80	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 33/51 Rpt: 34/81
<b>4</b> PAYEE NAME	LAST FIRST MI ZimWin Enterprises LLC		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  13492 Research Blvd #120-141  Austin, TX 78750		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Salaries/Wages/Contract Labor	<b>(b)</b> Description	
	<b>(c)</b> Date 09/27/2020	<b>(d)</b> Amount (\$) \$433.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 34/51 Rpt: 35/81
<b>4</b> PAYEE NAME	LAST FIRST MI The Austin Chronicle		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  4000 N Interstate 35 Frontage Rd  Austin, TX 78751		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 10/01/2020	<b>(d)</b> Amount (\$) \$3,090.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 35/51 Rpt: 36/81
<b>4</b> PAYEE NAME	LAST FIRST MI Moreland Consulting		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  5202 Woodmoor Dr  Austin, TX 78721		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Consulting Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 10/01/2020	<b>(d)</b> Amount (\$) \$7,100.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 36/51 Rpt: 37/81
<b>4</b> PAYEE NAME	LAST FIRST MI Moonshot Marketers LLC		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  1230 E 38th And Half St B  Austin, TX 78702		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 10/01/2020	<b>(d)</b> Amount (\$) \$5,193.94	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 37/51 Rpt: 38/81
<b>4</b> PAYEE NAME	LAST FIRST MI Moreland Consulting		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  5202 Woodmoor Dr  Austin, TX 78721		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Printing Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 10/05/2020	<b>(d)</b> Amount (\$) \$2,885.28	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 38/51 Rpt: 39/81
<b>4</b> PAYEE NAME	LAST FIRST MI Vera, Bobby		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  130 Niven Path  Jarrell, TX 76537		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Salaries/Wages/Contract Labor	<b>(b)</b> Description	
	<b>(c)</b> Date 10/05/2020	<b>(d)</b> Amount (\$) \$1,650.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 39/51 Rpt: 40/81
<b>4</b> PAYEE NAME	LAST FIRST MI Pinpoint Action, LLC		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  280 Wekiva Springs Road  Longwood, FL 32779		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 10/11/2020	<b>(d)</b> Amount (\$) \$5,000.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 40/51 Rpt: 41/81
<b>4</b> PAYEE NAME	LAST FIRST MI ZimWin Enterprises LLC		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  13492 Research Blvd #120-141  Austin, TX 78750		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Salaries/Wages/Contract Labor	<b>(b)</b> Description	
	<b>(c)</b> Date 10/09/2020	<b>(d)</b> Amount (\$) \$1,299.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future	<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 41/51 Rpt: 42/81
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<b>4</b> PAYEE NAME	LAST FIRST MI Flake, Dalton
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<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  220 Peppergrass Cove  Kyle, TX 78640
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<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Salaries/Wages/Contract Labor	<b>(b)</b> Description
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	<b>(c)</b> Date 10/08/2020	<b>(d)</b> Amount (\$) \$1,500.00
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<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)
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	<b>(c)</b> Office sought	<b>(d)</b> Office held
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# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 42/51 Rpt: 43/81
<b>4</b> PAYEE NAME	LAST FIRST MI Moreland Consulting		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  5202 Woodmoor Dr  Austin, TX 78721		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Printing Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 10/09/2020	<b>(d)</b> Amount (\$) \$2,130.63	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 43/51 Rpt: 44/81
<b>4</b> PAYEE NAME	LAST FIRST MI Moreland Consulting		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  5202 Woodmoor Dr  Austin, TX 78721		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Printing Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 10/13/2020	<b>(d)</b> Amount (\$) \$1,609.95	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 44/51 Rpt: 45/81
<b>4</b> PAYEE NAME	LAST FIRST MI Pinpoint Action, LLC		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  280 Wekiva Springs Road  Longwood, FL 32779		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 10/13/2020	<b>(d)</b> Amount (\$) \$49,999.99	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 45/51 Rpt: 46/81
<b>4</b> PAYEE NAME	LAST FIRST MI Aro Group, LLC		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  2509 Lazy Oaks Drive  Austin, TX 78745		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 10/13/2020	<b>(d)</b> Amount (\$) \$25,000.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Our Mobility Our Future	<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 46/51 Rpt: 47/81
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<b>4</b> PAYEE NAME	LAST FIRST MI Pinpoint Action, LLC
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<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  280 Wekiva Springs Road  Longwood, FL 32779
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<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description
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	<b>(c)</b> Date 10/18/2020	<b>(d)</b> Amount (\$) \$4,999.17
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<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)
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	<b>(c)</b> Office sought	<b>(d)</b> Office held
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# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 47/51 Rpt: 48/81
<b>4</b> PAYEE NAME	LAST FIRST MI Madden Music		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  10725 Old Lockhart Road Lot A  Austin, TX 78747		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Salaries/Wages/Contract Labor	<b>(b)</b> Description	
	<b>(c)</b> Date 10/08/2020	<b>(d)</b> Amount (\$) \$680.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 48/51 Rpt: 49/81
<b>4</b> PAYEE NAME	LAST FIRST MI Vera, Bobby		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  130 Niven Path  Jarrell, TX 76537		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Salaries/Wages/Contract Labor	<b>(b)</b> Description	
	<b>(c)</b> Date 10/12/2020	<b>(d)</b> Amount (\$) \$715.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 49/51 Rpt: 50/81
<b>4</b> PAYEE NAME	LAST FIRST MI Moreland Consulting		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  5202 Woodmoor Dr  Austin, TX 78721		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Printing Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 10/19/2020	<b>(d)</b> Amount (\$) \$3,176.37	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 50/51 Rpt: 51/81
<b>4</b> PAYEE NAME	LAST FIRST MI Pinpoint Action, LLC		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  280 Wekiva Springs Road  Longwood, FL 32779		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 10/19/2020	<b>(d)</b> Amount (\$) \$7,547.23	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME Our Mobility Our Future		<b>2</b> FILER ID 00090476	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 51/51 Rpt: 52/81
<b>4</b> PAYEE NAME	LAST FIRST MI Pinpoint Action, LLC		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  280 Wekiva Springs Road  Longwood, FL 32779		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 10/19/2020	<b>(d)</b> Amount (\$) \$12,500.00	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Contribution

FORM ATX1CONTRIB

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 1/28 Rpt: 53/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 10/13/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) 1301 Lakeway LLC <b>6</b> Contributor address; City; State; Zip Code PO Box 9190  Austin, TX 78766	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) 3 T & Y Partners, Ltd. Contributor address; City; State; Zip Code 5100 Hwy 290 West Building 2, Suite 200 Austin, TX 78735	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) 5900-2 Shepherd Mountain Cove LLC Contributor address; City; State; Zip Code 1717 W. 6th Street Suite 400 Austin, TX 78703	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Kevin 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 Contributor address; City; State; Zip Code 3700 North Capital of Texas Hwy Suite 420 Austin, TX 78746	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Self-Employed

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 2/28 Rpt: 54/81
<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#: _____) Anderson, Richard <b>6</b> Contributor address; City; State; Zip Code 3700 North Capital of Texas Hwy Suite 420 Austin, TX 78746	<b>7</b> Amount of Contribution (\$) \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Investor		<b>9</b> Employer (See Instructions) Self-Employed
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aune, Jon Carson Contributor address; City; State; Zip Code 374 King Arthur Ct Austin, TX 78703	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 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
Date 08/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnard, Hayes Contributor address; City; State; Zip Code 440 Ridge Road Tiburon, CA 94920	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Loanpal
Date 09/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Alan Contributor address; City; State; Zip Code 7706 Stoneywood Dr Austin, TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 3/28 Rpt: 55/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 08/14/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barron, Michael <b>6</b> Contributor address; City; State; Zip Code 4304 Long Champ Dr  Austin, TX 78746	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney & Real Estate Consultant		<b>9</b> Employer (See Instructions) Self-employed
Date 10/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauld, Mandy Contributor address; City; State; Zip Code 4502 Spanish Oak Trail  Austin, TX 78731	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Joel 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, P.C.
Date 10/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beuerlein, Laura Contributor address; City; State; Zip Code 2603 Exposition Blvd Ste G 12 Austin, TX 78703	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Heritage Title Company
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bicar Family Holdings LLC Contributor address; City; State; Zip Code 2402 Rockmoor Ave  Austin, TX 78703	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 4/28 Rpt: 56/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 09/02/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birdsall, Paul	<b>7</b> Amount of Contribution (\$)  \$10.00
	<b>6</b> Contributor address; City; State; Zip Code 11804 Whitewing Avenue  Austin, TX 78753	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolton, David	Amount of Contribution (\$)  \$2,000.00
	Contributor address; City; State; Zip Code 3103 Bee Caves Rd Ste 225 Austin, TX 78746	
Principal occupation / Job title (See Instructions) Real Estate Consulting		Employer (See Instructions) Bolton Real Estate Consultants Ltd
Date 09/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boothe, Terry	Amount of Contribution (\$)  \$5,000.00
	Contributor address; City; State; Zip Code 12535 Highway 71 West  Austin, TX 78738	
Principal occupation / Job title (See Instructions) Business & Property Owner		Employer (See Instructions) Self
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, James	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code 1307 Kinney Ave Apt 140 Austin, TX 78704	
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#: _____) Broaddus, Bill	Amount of Contribution (\$)  \$1,000.00
	Contributor address; City; State; Zip Code 8514 Lime Creek Rd  Volente, TX 78641	
Principal occupation / Job title (See Instructions) Service Station Owner		Employer (See Instructions) Self-employed

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 5/28 Rpt: 57/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 07/13/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown Distributing <b>6</b> Contributor address; City; State; Zip Code 8711 Johnny Morris Rd  Austin, TX 78724	<b>7</b> Amount of Contribution (\$)  \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown Distributing Company Contributor address; City; State; Zip Code 8711 Johnny Morris Rd  Austin, TX 78724	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brunson, Leigh Ann 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 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bull Creek Explorer, L.L.C. Contributor address; City; State; Zip Code 1711 Meadowbrook Dr  Austin, TX 78703	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burrow, Janis Contributor address; City; State; Zip Code 5515 Balcones Drive  Austin, TX 78731	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 6/28 Rpt: 58/81
<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> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrow, Janis	<b>7</b> Amount of Contribution (\$) \$4,500.00
	<b>6</b> Contributor address; City; State; Zip Code 5515 Balcones Drive  Austin, TX 78731	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Robert	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 222 West Ave  Austin, TX 78701	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Winstead PC
Date 06/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury III, Paul	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 2615 Harris Blvd  Austin, TX 78703	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calvert, Stanton	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code 3913 Greystone Drive  Austin, TX 78731	
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	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 8310 North Capital of Texas Hwy Suite 2-300 Austin, TX 78731	
Principal occupation / Job title (See Instructions) COO/Co-Founder		Employer (See Instructions) Breakingpoint Systems Inc

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 7/28 Rpt: 59/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 09/15/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Tommy <b>6</b> Contributor address; City; State; Zip Code 250 Colonial Affair  Austin, TX 78737	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Civil Engineer		<b>9</b> Employer (See Instructions) Carlson, Brigance & Doering
Date 02/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Maund Toyota Contributor address; City; State; Zip Code 8400 Research Blvd  Austin, TX 78767	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher, Gregory Contributor address; City; State; Zip Code 4301 W William Cannon Dr Bldg E-1 Suite 150 Austin, TX 78709	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Christopher Inv. Co.
Date 10/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) City Lights Austin Apts, LLC Contributor address; City; State; Zip Code PO Box 92709  Austin, TX 78709	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Commerce NE 1800 LLC Contributor address; City; State; Zip Code 5100 Hwy 290 West Building 2, Suite 200 Austin, TX 78735	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 8/28 Rpt: 60/81
<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#: _____) Cotton, Jim <b>6</b> Contributor address; City; State; Zip Code 11000 Spicewood Pkwy  Austin, TX 78750	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Investments		<b>9</b> Employer (See Instructions) Self-employed
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Court 2000 Ltd <b>6</b> Contributor address; City; State; Zip Code 5100 Hwy 290 West Building 2, Suite 200 Austin, TX 78735	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DPS Georgetown 2000 LLC <b>6</b> Contributor address; City; State; Zip Code 5100 Hwy 290 West Building 2, Suite 200 Austin, TX 78735	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daugherty, Gerald <b>6</b> Contributor address; City; State; Zip Code 1403 Club Ridge CV  Austin, TX 78735	Amount of Contribution (\$)  \$4,000.00
Principal occupation / Job title (See Instructions) Elected Official		Employer (See Instructions) Travis County
Date 04/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daugherty, Gerald <b>6</b> Contributor address; City; State; Zip Code 1403 Club Ridge CV  Austin, TX 78735	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Elected official		Employer (See Instructions) Travis County

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 9/28 Rpt: 61/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 04/20/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daugherty, Gerald	<b>7</b> Amount of Contribution (\$) \$5,000.00
<b>6</b> Contributor address; City; State; Zip Code 1403 Club Ridge CV  Austin, TX 78735		
<b>8</b> Principal occupation / Job title (See Instructions) Elected official		<b>9</b> Employer (See Instructions) Travis County
Date 08/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dime 2000 Ltd	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 5100 Hwy 290 West Building 2 Suite 200 Austin, TX 78735		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Douglas, Todd	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Lemen's Spice Trail  Austin, TX 78750		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dyer, Don	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code 3301 Big Bend Drive  Austin, TX 78731		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PJS of Texas, Inc.
Date 08/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eagle 2000 II, Ltd	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 510 West 15th Street  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 10/28 Rpt: 62/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 06/13/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edward, Korompai	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code 8900 Research Park Drive Apt 1023 The Woodlands, TX 77381	
<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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 309 East 35th Street Austin, TX 78705	
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	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 1702 Channel Road Austin, TX 78746	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Endeavor
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIX 2000 LLC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 5100 Hwy 290 West Building 2, Suite 200 Austin, TX 78735	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fellows, Mary	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 8619 Honeysuckle Trail Austin, TX 78759	
Principal occupation / Job title (See Instructions) Graphic Design		Employer (See Instructions) Pencraft Graphic Design

# Contribution

FORM ATX1CONTRIB

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 11/28 Rpt: 63/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 10/09/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glasgow, William <b>6</b> Contributor address; City; State; Zip Code 221 W 6th St Ste 2000 Austin, TX 78701	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Developer		<b>9</b> Employer (See Instructions) Self-Employed
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Steven Contributor address; City; State; Zip Code 4609 Lyons Rd Austin, TX 78702	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Colby Contributor address; City; State; Zip Code 15829 Garrison Circle Austin, TX 78717	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Landscaping		Employer (See Instructions) Green Leaf Arbor Care
Date 09/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Horace Contributor address; City; State; Zip Code 1914 West 40th Street Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) Self-Employed
Date 08/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Mark 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

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 12/28 Rpt: 64/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 10/18/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Mark <b>6</b> Contributor address; City; State; Zip Code 98 San Jacinto Blvd Unit FSR 2501 Austin, TX 78701	<b>7</b> Amount of Contribution (\$) \$30,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEAVY 2000, LTD. Contributor address; City; State; Zip Code 510 West 15th Street Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardeman, Bryan Contributor address; City; State; Zip Code 6757 Airport Blvd Austin, TX 78752	Amount of Contribution (\$) \$20,000.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Douglas Contributor address; City; State; Zip Code 3345 Bee Cave Rd Suite 205 Austin, TX 78746	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Real Estate Investments		Employer (See Instructions) Self-Employed
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Head, Ray Contributor address; City; State; Zip Code 4210 Spicewood Springs Rd #211 Austin, TX 78759	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Real Estate Consultant		Employer (See Instructions) Self-Employed

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 13/28 Rpt: 65/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 10/18/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrix, Scott <b>6</b> Contributor address; City; State; Zip Code 5610 Bonnell Vista St  Austin, TX 78731	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Financial Services		<b>9</b> Employer (See Instructions) Self-Employed
Date 03/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Rae Contributor address; City; State; Zip Code 2303 Windsor Rd  Austin, TX 78703	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) housewife		Employer (See Instructions) none
Date 10/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hock, Stacy Contributor address; City; State; Zip Code 3331 Westlake Dr  Austin, TX 78746	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston, Sam Contributor address; City; State; Zip Code 3700 N Capital of TX 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 10/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Independence Woods, LLC DBA The Shops At Arbor Trails Contributor address; City; State; Zip Code 4301 W William Cannon Dr Building-E1, Ste 150 Austin, TX 78749	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 14/28 Rpt: 66/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 09/22/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jordan <b>6</b> Contributor address; City; State; Zip Code 201 Barton Springs Road  Austin, TX 78704	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate		<b>9</b> Employer (See Instructions) McAllister & Associates
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Steve 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 09/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juan in a Million 2300, LLC Contributor address; City; State; Zip Code 2300 E Cesar Chavez St  Austin, TX 78702	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kay, Robert Contributor address; City; State; Zip Code 1608 Gaston Ave  Austin, TX 78703	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kochwelp, William Contributor address; City; State; Zip Code 10101 Eastman Cove  Austin, TX 78750	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Real Estate Investments		Employer (See Instructions) Self-employed

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 15/28 Rpt: 67/81
<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> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kozuh, Joseph <b>6</b> Contributor address; City; State; Zip Code 3839 Dry Creek Drive Condo 136 Austin, TX 78731	<b>7</b> Amount of Contribution (\$) \$45.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kruger Jewelry Co., Inc. of Austin Contributor address; City; State; Zip Code 722 Congress Ave Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kuznieski, Nancy 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 Agency, Inc.
Date 09/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kuznieski, Nancy Contributor address; City; State; Zip Code 2312 Western Trails Blvd Suite 102B Austin, TX 78745	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Insurance Broker		Employer (See Instructions) Nancy Kuznieski Insurance Agency, Inc.
Date 10/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lake Villa, LLC DBA Escarpment Village Contributor address; City; State; Zip Code 4301 W William Cannon Dr Building-E1, Ste 150 Austin, TX 78749	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# Contribution

FORM ATX1CONTRIB

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 16/28 Rpt: 68/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 08/06/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lastlot 2000 Ltd <b>6</b> Contributor address; City; State; Zip Code 5100 Hwy 290 West Building 2, Suite 200 Austin, TX 78735	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lehman, Jeanine Contributor address; City; State; Zip Code 6702 Fireoak Drive Austin, TX 78759	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Jeanine Lehman PC
Date 08/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levy, Michael 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
Date 09/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levy, Michael Contributor address; City; State; Zip Code PO Box 146 Austin, TX 78767	Amount of Contribution (\$) \$8,900.00
Principal occupation / Job title (See Instructions) Founder and Retired Publisher		Employer (See Instructions) Texas Monthly
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levy, Michael Contributor address; City; State; Zip Code PO Box 146 Austin, TX 78767	Amount of Contribution (\$) \$5,810.00
Principal occupation / Job title (See Instructions) Founder and Retired Publisher		Employer (See Instructions) Texas Monthly

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 17/28 Rpt: 69/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 02/13/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lewis, John	<b>7</b> Amount of Contribution (\$) \$4,000.00
<b>6</b> Contributor address; City; State; Zip Code 3839 Bee Cave Road Suite 204 Austin, TX 78746		
<b>8</b> Principal occupation / Job title (See Instructions) Investments		<b>9</b> Employer (See Instructions) John Lewis Company
Date 02/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lewis, John	Amount of Contribution (\$) \$20,000.00
Contributor address; City; State; Zip Code 3839 Bee Cave Road Suite 204 Austin, TX 78746		
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) John Lewis Company
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Loewy, Adam	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code 6812 Valburn Dr  Austin, TX 78731		
Principal occupation / Job title (See Instructions) Privat Attorney		Employer (See Instructions) Self-Employed
Date 10/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maier, Richard	Amount of Contribution (\$) \$350.00
Contributor address; City; State; Zip Code 704 East 45th 1/2 Street  Austin, TX 78751		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Lennar
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marco, Albert	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code 201 W Howard Lane  Austin, TX 78753		
Principal occupation / Job title (See Instructions) Principal Founder		Employer (See Instructions) Casa Marco Management

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 18/28 Rpt: 70/81
<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#: _____ ) McCall, John <b>6</b> Contributor address; City; State; Zip Code PO Box 633 Spicewood, TX 78669	<b>7</b> Amount of Contribution (\$) \$24,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> 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
Date 10/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mercedes-Benz of Austin Contributor address; City; State; Zip Code 6757 Airport Blvd Austin, TX 78752	Amount of Contribution (\$) \$25,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mesa Plaza LTD Contributor address; City; State; Zip Code PO Box 161507 Austin, TX 78716	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 19/28 Rpt: 71/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 10/07/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michel, Lorri	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code 917 West Lynn Street  Austin, TX 78703	
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) Michel Grey & Rogers
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, William	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code 1 Brett Cove  Austin, TX 78746	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) William F Moore
Date 08/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NL Land Holdings / 2309 Howard Lane	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code 3839 Bee Cave Rd Suite 204 Austin, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nehrkorn, Craig	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Tecate Trail  Austin, TX 78739	
Principal occupation / Job title (See Instructions) Robotics		Employer (See Instructions) NA
Date 10/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Northfield Estates, LLC / Catherine Tower, LLC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code PO Box 92709  Austin, TX 78709	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 20/28 Rpt: 72/81
<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#: _____ ) OLeary, Mark <b>6</b> Contributor address; City; State; Zip Code 5904 Republic of Texas Blvd Suite 420 Austin, TX 78735	<b>7</b> Amount of Contribution (\$) \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Consultant		<b>9</b> Employer (See Instructions) Private
Date 08/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pence, Bert 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 Investor		Employer (See Instructions) Self-Employed
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pfluger JV I, Ltd Contributor address; City; State; Zip Code 5100 Hwy 290 West Building 2, Suite 200 Austin, TX 78735	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pickroy 2000 LLC Contributor address; City; State; Zip Code 5100 Hwy 290 West Building 2, Suite 200 Austin, TX 78735	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pique 2000 Ltd Contributor address; City; State; Zip Code 5100 Hwy 290 West Building 2, Suite 200 Austin, TX 78735	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 21/28 Rpt: 73/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 09/30/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Prevratil, Scott <b>6</b> Contributor address; City; State; Zip Code 11902 Buckingham Road  Austin, TX 78759	<b>7</b> Amount of Contribution (\$)  \$45.00
<b>8</b> Principal occupation / Job title (See Instructions) Systems Admin		<b>9</b> Employer (See Instructions) State of Texas
Date 08/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Remark 2000 Ltd Contributor address; City; State; Zip Code 5100 Hwy 290 West Building 2, Suite 200 Austin, TX 78735	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rhodes Jr., Sonny Contributor address; City; State; Zip Code 6506 Mesa Drive  Austin, TX 78731	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roberts, Kevin 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
Date 07/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roberts, Roger Contributor address; City; State; Zip Code 2750 NE 23rd St  Pompeo Beach, FL 33062	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# Contribution

FORM ATX1CONTRIB

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 22/28 Rpt: 74/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 07/13/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roberts, Vicki <b>6</b> Contributor address; City; State; Zip Code 3201 Aztec Fall Cove  Austin, TX 78746	<b>7</b> Amount of Contribution (\$)  \$50,000.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roche, David 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#: _____ ) Roger Beasley Mazda South Contributor address; City; State; Zip Code 4506 S IH-35  Austin, TX 78745	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ruehlman, David Contributor address; City; State; Zip Code 1605 Twilight Ridge Dr  Austin, TX 78746	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Landscaping		Employer (See Instructions) Self-Employed
Date 06/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) STEJO Investments LP Contributor address; City; State; Zip Code 1601 S Mopac Expressway Suite D-175 Austin, TX 78746	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 23/28 Rpt: 75/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 08/19/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanchez, Robert	<b>7</b> Amount of Contribution (\$) \$5,000.00
	<b>6</b> Contributor address; City; State; Zip Code 4811 Palisade Drive  Austin, TX 78746	
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) Hexadyne Corp
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Satterlee, Kenneth	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code 901 S Mopac Expy Building 1, Suite 160 Austin, TX 78746	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-Employed
Date 10/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sayers, Scott	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 1800 Nueces Street  Austin, TX 78701	
Principal occupation / Job title (See Instructions) Money Manager		Employer (See Instructions) Scott Sayers Co
Date 09/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shaw, Stuart	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code 6009 Eleos Circle  Austin, TX 78735	
Principal occupation / Job title (See Instructions) Real Estate Developer		Employer (See Instructions) Self-Employed
Date 10/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherer, Jeff	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code 5002 Valley Oak Drive  Austin, TX 78701	
Principal occupation / Job title (See Instructions) Engineering Mgr		Employer (See Instructions) Forcepoint

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 24/28 Rpt: 76/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 08/27/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shive, James <b>6</b> Contributor address; City; State; Zip Code 6506 Auburndale Street  Austin, TX 78723	<b>7</b> Amount of Contribution (\$)  \$45.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 02/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skaggs, Jim Contributor address; City; State; Zip Code 4700 Toreador Drive  Austin, TX 78746	Amount of Contribution (\$)  \$6,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skaggs, Jim Contributor address; City; State; Zip Code 4700 Toreador Drive  Austin, TX 78746	Amount of Contribution (\$)  \$8,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Paul Contributor address; City; State; Zip Code 7801 Shoal Creek Blvd 228 Austin, TX 78757	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Adjunct Professor		Employer (See Instructions) Austin Community College
Date 10/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Terral Contributor address; City; State; Zip Code 6304 Cat Mountain Cv  Austin, TX 78731	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 25/28 Rpt: 77/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 09/11/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spatz, David	<b>7</b> Amount of Contribution (\$) \$4,000.00
	<b>6</b> Contributor address; City; State; Zip Code 694 Windsong Trail  Austin, TX 78746	
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Investor		<b>9</b> Employer (See Instructions) Self-Employed
Date 08/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) TADA BUILDING, LP	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 510 West 15th Street  Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) TDCJ 2000 LLC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 5100 Hwy 290 West Building 2, Suite 200 Austin, TX 78735	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tanner, Gary	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 812 Stonewall Ridge Lane  Austin, TX 78746	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Kent	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code 900 Congress Ave Suite L165 Austin, TX 78701	
Principal occupation / Job title (See Instructions) Founder & Owner		Employer (See Instructions) Taylor Commercial Real Estate

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 26/28 Rpt: 78/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 09/27/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Terreson, David <b>6</b> Contributor address; City; State; Zip Code 3812 Agape Lane  Austin, TX 78735	<b>7</b> Amount of Contribution (\$)  \$350.00
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Cardiotexas
Date 08/26/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Winkle, Carl Contributor address; City; State; Zip Code 8112 Tahoe Parke Cir  Austin, TX 78726	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vo, Kuantan Contributor address; City; State; Zip Code 809 Screech Owl Dr  Pflugerville, TX 78660	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Sr. Implementation Engineer		Employer (See Instructions) Abrigo
Date 10/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Warren, Serene Contributor address; City; State; Zip Code 210 Lavaca Street 3405 Austin, TX 78701	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Welp, Mark Contributor address; City; State; Zip Code 108 Barefoot Cv  Austin, TX 78730	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 27/28 Rpt: 79/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 10/09/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Welp, Mark <b>6</b> Contributor address; City; State; Zip Code 7108 Barefoot Cv  Austin, TX 78730	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Westlake Medical of Austin LTD <b>6</b> Contributor address; City; State; Zip Code PO Box 161507  Austin, TX 78716	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Westlake Medical of Austin LTD Phase II <b>6</b> Contributor address; City; State; Zip Code PO Box 161507  Austin, TX 78716	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilson III, Desmond <b>6</b> 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 10/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wong, Mitchel <b>6</b> Contributor address; City; State; Zip Code 1700 Stoneridge Ter  Austin, TX 78746	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Optometrist		Employer (See Instructions) Self

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 28/28 Rpt: 80/81
<b>2</b> FILER NAME Our Mobility Our Future		<b>3</b> Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 09/06/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wood, Ellen <b>6</b> Contributor address; City; State; Zip Code 5001 Sevan Cove  Austin, TX 78731	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) VCFO, Inc.
Date 06/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Xie, Xi Contributor address; City; State; Zip Code 2120 Westfalian Trail  Austin, TX 78732	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/31/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zito, Paul Contributor address; City; State; Zip Code 4445 River Garden Trl  Austin, TX 78746	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Internal Medicine		Employer (See Instructions) Ascension Medical Group
Date 10/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zito, Paul Contributor address; City; State; Zip Code 4445 River Garden Trail  Austin, TX 78746	Amount of Contribution (\$)  \$20,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zuniga, Diana Contributor address; City; State; Zip Code 300 Bowie Street 100A Austin, TX 78703	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Investors alliance

# Report of Direct Campaign Expenditures:

## ATX.1

### AFFIDAVIT

This information serves as the electronic signature of the person legally responsible for filing this report.

I swear or affirm under penalty of perjury that each direct campaign expenditure was made without prior consent, cooperation, strategic communication, consultation, or sharing of material information regarding the communication's content, intended audience, timing, or method of dissemination between an affected candidate, the candidate's campaign staff, the candidate's campaign committee, or an agent or employee of the candidate or the committee, and the person making the expenditure, or that person's agent or employee.

I further swear or affirm under penalty of perjury that this Report of Direct Campaign Expenditures is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code Section 2-2-32.

Our Mobility Our Future

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Signature of Filer