

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC
COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090488		2 Total pages filed: 40	
3 COMMITTEE NAME Mobility for All				OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/26/2020 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3110 Manor Road Suite H Austin, TX 78723				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Colette NICKNAME LAST SUFFIX Pierce Burnette				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 801 W 5th Street Apt 1903 Austin, TX 78703				
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE TX				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 481-2505				
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 Limit <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination				
10 PERIOD COVERED	Month Day Year Month Day Year 09/25/2020 THROUGH 10/24/2020				
11 ELECTION	ELECTION DATE Month Day Year 11/03/2020		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME Mobility for All		13 Filer ID (Ethics Commission Filers) 00090488	
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate <input type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)	
	<input checked="" type="checkbox"/> Measure	BALLOT IDENTIFICATION / # Prop A	
		ELECTION DATE Month Day Year 11/03/2020	
		DESCRIPTION Transit Ballot Measure	
15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 333,852.90
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 991,193.83
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 206,828.78
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00

16 AFFIDAVIT

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

Colette Pierce Burnette

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - SPAC**FORM SPAC**
COVER SHEET PG 3
3 of 40

17 COMMITTEE NAME Mobility for All		18 Filer ID (Ethics Commission Filers) 00090488
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 71,802.90
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 180,000.00
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 262,050.00
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 991,193.83
9.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
14.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/15 Rpt: 4/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/08/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abdun-Nabi, Alex <hr/> 6 Contributor address; City; State; Zip Code 2320 Gracy Farms Lane Apt 1131 Austin, TX 78758	7 Amount of Contribution (\$) \$105.58
8 Principal occupation / Job title (See Instructions) Emergency Manager		9 Employer (See Instructions) State of Texas
Date 10/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Attas, Jesse <hr/> Contributor address; City; State; Zip Code 1803 Princeton Ave Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self Employed
Date 10/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baer, Therese <hr/> Contributor address; City; State; Zip Code 7756 Northcross Drive Suite 211 Austin, TX 78757	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Professional Engineer		Employer (See Instructions) Baer Engineering & Environmental Consulting, Inc.
Date 10/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanchard, Dustin <hr/> Contributor address; City; State; Zip Code 1212 Chicon St Unit 305 Austin, TX 78702	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) CarServ
Date 10/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bojo, Leah <hr/> Contributor address; City; State; Zip Code 2943 Moss St Austin, TX 78722	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Drenner Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/15 Rpt: 5/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowen, Taylor 6 Contributor address; City; State; Zip Code 4223 Shorecrest Dallas, TX 75209	7 Amount of Contribution (\$) \$526.63
8 Principal occupation / Job title (See Instructions) Propt Management		9 Employer (See Instructions) AMLI Residential
Date 10/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowman, Ross Contributor address; City; State; Zip Code 7128 Envoy Ct Dallas, TX 75247	Amount of Contribution (\$) \$263.47
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Bowman Engineering & Consulting
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowman, Shauna Contributor address; City; State; Zip Code 7128 Envoy Ct Dallas, TX 75247	Amount of Contribution (\$) \$2,368.74
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) Bowman Engineering & Consulting
Date 09/27/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradford, Daniel Contributor address; City; State; Zip Code 4361 S Congress Ave #231 Austin, TX 78745	Amount of Contribution (\$) \$263.47
Principal occupation / Job title (See Instructions) UT Medical Branch - Galveston		Employer (See Instructions) Student
Date 10/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, David Contributor address; City; State; Zip Code PO Box 1148 Dripping Springs, TX 78620-1148	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Principal, Attorney & Counselor		Employer (See Instructions) Braun & Gresham

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/15 Rpt: 6/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 09/25/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brimer, Richard <hr/> 6 Contributor address; City; State; Zip Code 6417 Yaupon Drive Austin, TX 78759	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 10/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brodman, Emily <hr/> Contributor address; City; State; Zip Code 505 Texas Ave Austin, TX 78705	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Director of Product		Employer (See Instructions) Yonder
Date 09/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burack, Casey <hr/> Contributor address; City; State; Zip Code 2520 Bluebonnet Lane Unit 29 Austin, TX 78704	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Downtown Austin Alliance
Date 09/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charney, Davida <hr/> Contributor address; City; State; Zip Code 3702 Terrina St Apt 7 Austin, TX 78759	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas at Austin
Date 10/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cochran, Jensen <hr/> Contributor address; City; State; Zip Code 8311 Stillwood Ln Austin, TX 78757	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Vectra AI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/15 Rpt: 7/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/01/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cofer, George <hr/> 6 Contributor address; City; State; Zip Code 3306 Gentry Drive Austin, TX 78746	7 Amount of Contribution (\$) \$263.47
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Hill Country Conservancy
Date 10/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cofer, George <hr/> Contributor address; City; State; Zip Code 3306 Gentry Drive Austin, TX 78746	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Hill Country Conservancy
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daigle, Scott <hr/> Contributor address; City; State; Zip Code 6706 Tulane Drive Austin, TX 78723	Amount of Contribution (\$) \$21.37
Principal occupation / Job title (See Instructions) Public Policy Director		Employer (See Instructions) Texas Council for Developmental Disabilities
Date 10/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dietrich, Tim <hr/> Contributor address; City; State; Zip Code 1705 Piedmont Ave Austin, TX 78757	Amount of Contribution (\$) \$16.11
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Vrbo
Date 10/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan-Hall, Tyra <hr/> Contributor address; City; State; Zip Code 5203 Welcome Gln Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/15 Rpt: 8/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewen, Chris Whit <hr/> 6 Contributor address; City; State; Zip Code 4504 Merle Dr Austin, TX 78745	7 Amount of Contribution (\$) \$10.84
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self Employed
Date 09/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeland, Joe <hr/> Contributor address; City; State; Zip Code 2607 Zach Scott Austin, TX 78723	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Mathews & Freeland
Date 09/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Jerry <hr/> Contributor address; City; State; Zip Code 112 Chaumont Street Kingsland, TX 78639	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Real Estate Professional		Employer (See Instructions) Savills
Date 10/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilpin, Charlotte <hr/> Contributor address; City; State; Zip Code 8908 GALLANT FOX RD AUSTIN, TX 78737	Amount of Contribution (\$) \$263.47
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) K Friese + Associates
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodman, Seth <hr/> Contributor address; City; State; Zip Code 18 Gorham Street #2 Somerville, MA 02144	Amount of Contribution (\$) \$158.21
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Fennick McCredie Architecture

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/15 Rpt: 9/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/19/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harutunian, Anne <hr/> 6 Contributor address; City; State; Zip Code P.O. Box 14487 Austin, TX 78761	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) None
Date 10/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harutunian , Takoohy <hr/> Contributor address; City; State; Zip Code P.O. Box 14487 Austin, TX 78761	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Harutunian Engineering
Date 10/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, Alex <hr/> Contributor address; City; State; Zip Code 406 W Milton Austin, TX 78704	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas Austin
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, James <hr/> Contributor address; City; State; Zip Code 11701 Stonehollow Dr. Suite 100 Austin, TX 78758	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) P.E./President		Employer (See Instructions) ATG Alliance Transportation Group
Date 10/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard-McKinney, Will <hr/> Contributor address; City; State; Zip Code 1310 E 52nd St Austin, TX 78723	Amount of Contribution (\$) \$10.84
Principal occupation / Job title (See Instructions) Demo Content Specialist		Employer (See Instructions) Atlassian

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/15 Rpt: 10/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 09/28/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiloh, Greg <hr/> 6 Contributor address; City; State; Zip Code 4512 Ruiz Street Austin, TX 78723	7 Amount of Contribution (\$) \$52.95
8 Principal occupation / Job title (See Instructions) Temporary		9 Employer (See Instructions) City of Austin
Date 10/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Rebecca <hr/> Contributor address; City; State; Zip Code 1023 Springdale Rd Suite 6E Austin, TX 78721	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Planner and Landscape Architect		Employer (See Instructions) Lionheart Places LLC
Date 10/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorenz, Perry <hr/> Contributor address; City; State; Zip Code 1311-a East 6th St Austin, TX 78702	Amount of Contribution (\$) \$5,263.47
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self Employed
Date 10/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lubomudrov, Andrei <hr/> Contributor address; City; State; Zip Code 5607 Westminster Dr Austin, TX 78723	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) City of Austin
Date 10/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Garrett <hr/> Contributor address; City; State; Zip Code 3211 Bridle Path Austin, TX 78703	Amount of Contribution (\$) \$15,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Milestone

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/15 Rpt: 11/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/15/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meed, Alex <hr/> 6 Contributor address; City; State; Zip Code 311 Bowie St Apt 1904 Austin, TX 78703	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Cybersecurity Analyst		9 Employer (See Instructions) Atlassian
Date 09/26/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Scott <hr/> Contributor address; City; State; Zip Code PO Box 49166 Austin, TX 78765	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed
Date 10/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nabours, Cathy <hr/> Contributor address; City; State; Zip Code 101 Colorado St Apt 2009 Austin, TX 78701	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) JLL
Date 09/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Opalka, Douglas <hr/> Contributor address; City; State; Zip Code 1710 Forest Trl Austin, TX 78703	Amount of Contribution (\$) \$1,052.95
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) JLL
Date 10/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peart, Dewitt <hr/> Contributor address; City; State; Zip Code 12107 Cottage Promenade Court Austin, TX 78753	Amount of Contribution (\$) \$263.47
Principal occupation / Job title (See Instructions) Economic Development		Employer (See Instructions) Austin DMO, Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/15 Rpt: 12/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/05/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Chris <hr/> 6 Contributor address; City; State; Zip Code 1310 San Antonio St., Apt. 1 Austin, TX 78701	7 Amount of Contribution (\$) \$52.95
8 Principal occupation / Job title (See Instructions) Property Manager		9 Employer (See Instructions) Self Employed
Date 09/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodman, James <hr/> Contributor address; City; State; Zip Code 3303 Hillview Road Austin, TX 78703	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 09/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Geronimo <hr/> Contributor address; City; State; Zip Code 905 Philco Drive Austin, TX 78755	Amount of Contribution (\$) \$21.37
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) Ascension
Date 09/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosato, John <hr/> Contributor address; City; State; Zip Code 1205 Wilderness Cove Austin, TX 78746	Amount of Contribution (\$) \$263.47
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) john@swsg.com
Date 10/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Patrick <hr/> Contributor address; City; State; Zip Code 730 Belvin St San Marcos, TX 78666	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Corridor Title Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/15 Rpt: 13/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubenstein, Ben <hr/> 6 Contributor address; City; State; Zip Code 811 Congress Ave Austin, TX 78701	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) CRO		9 Employer (See Instructions) Realtor.com
Date 09/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudow, Galit <hr/> Contributor address; City; State; Zip Code 2204 Robert Browning St Austin, TX 78723	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Nurse Midwife		Employer (See Instructions) Travis County
Date 10/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuels, Tom <hr/> Contributor address; City; State; Zip Code 4305 Duval Street Apt 324 Austin, TX 78751	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) None
Date 10/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scarborough, John <hr/> Contributor address; City; State; Zip Code 3108 Glenview Austin, TX 78701	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Deep Eddy Vodka
Date 10/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheidt, Dorian <hr/> Contributor address; City; State; Zip Code 2204 E 8th St Austin, TX 78702	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Salesforce

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/15 Rpt: 14/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/18/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schirmer, Jerry <hr/> 6 Contributor address; City; State; Zip Code 1120 Colony North Dr. Austin, TX 78758	7 Amount of Contribution (\$) \$263.47
8 Principal occupation / Job title (See Instructions) Principal Machine Learning Engineer		9 Employer (See Instructions) KUNGFU.AI
Date 10/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Scott <hr/> Contributor address; City; State; Zip Code 24011 W FM 1097 Montgomery, TX 77356	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Self Employed
Date 09/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Jeanette <hr/> Contributor address; City; State; Zip Code 406 Buckeye Trl West Lake Hills, TX 78746	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Film Decorator		Employer (See Instructions) Self Employed
Date 09/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siff, Ted <hr/> Contributor address; City; State; Zip Code 604 West 11th Street Austin, TX 78701	Amount of Contribution (\$) \$526.63
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Park Place Publications
Date 09/27/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Paul <hr/> Contributor address; City; State; Zip Code 7801 Shoal Creek Blvd Apt 228 Austin, TX 78757	Amount of Contribution (\$) \$10.84
Principal occupation / Job title (See Instructions) Adjunct Professor		Employer (See Instructions) Austin Community College

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/15 Rpt: 15/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/15/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Paul <hr/> 6 Contributor address; City; State; Zip Code 7801 Shoal Creek Blvd Apt 228 Austin, TX 78757	7 Amount of Contribution (\$) \$10.84
8 Principal occupation / Job title (See Instructions) Adjunct Professor		9 Employer (See Instructions) Austin Community College
Date 09/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stallings, Robin <hr/> Contributor address; City; State; Zip Code 2208 Santa Rosa St Austin, TX 78702	Amount of Contribution (\$) \$316.11
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) BikeTexas
Date 10/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Daniel <hr/> Contributor address; City; State; Zip Code 812 Sheraton Ave Austin, TX 78745	Amount of Contribution (\$) \$31.89
Principal occupation / Job title (See Instructions) QA Automation Engineer		Employer (See Instructions) Indeed
Date 10/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terrazas, Louis <hr/> Contributor address; City; State; Zip Code 11542 Whisper Breeze San Antonio, TX 78230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tryba, Andy <hr/> Contributor address; City; State; Zip Code 801 W 5th St Apt 2901 Austin, TX 78703	Amount of Contribution (\$) \$526.63
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Ionic Partners

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/15 Rpt: 16/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/17/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Scott <hr/> 6 Contributor address; City; State; Zip Code 3201 Sunny Ln Austin, TX 78731	7 Amount of Contribution (\$) \$263.47
8 Principal occupation / Job title (See Instructions) Home builder		9 Employer (See Instructions) Turner Residential LLC
Date 10/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuttle, Tyson <hr/> Contributor address; City; State; Zip Code 608 Baylor St Austin, TX 78703	Amount of Contribution (\$) \$15,000.00
Principal occupation / Job title (See Instructions) Technology/CEO		Employer (See Instructions) Silicon Labs
Date 09/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyree, Preston <hr/> Contributor address; City; State; Zip Code 4314 Vaughan Street Austin, TX 78723	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 10/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vick, Isabella <hr/> Contributor address; City; State; Zip Code 1000 San Marcos Street Apt 252 Austin, TX 78702	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Marketing specialist		Employer (See Instructions) Kahoot!
Date 10/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Javier <hr/> Contributor address; City; State; Zip Code 3702 Gable Dr Austin, TX 78759	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Senior Software Developer		Employer (See Instructions) Applied Research Laboratories

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/15 Rpt: 17/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/01/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villemez, Derek <hr/> 6 Contributor address; City; State; Zip Code 6802 Rio Bravo Lane Austin, TX 78737	7 Amount of Contribution (\$) \$21.37
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) DPR Construction
Date 09/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wald, Thomas <hr/> Contributor address; City; State; Zip Code 4016 Maplewood Ave Austin, TX 78722	Amount of Contribution (\$) \$10.84
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Red Line Parkway Initiative
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Tyler <hr/> Contributor address; City; State; Zip Code 405 W Live Oak St #1 Austin, TX 78704	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) Walmart
Date 09/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wooten, Robert <hr/> Contributor address; City; State; Zip Code 403 Wallis Drive Austin, TX 78746	Amount of Contribution (\$) \$1,052.95
Principal occupation / Job title (See Instructions) Real Estate Finance		Employer (See Instructions) JLL
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wynn, Robert <hr/> Contributor address; City; State; Zip Code 1209 Castle Hill Austin, TX 78703	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Real Estate Consultant		Employer (See Instructions) Cushman Wakefield

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/15 Rpt: 18/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 09/25/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Alan <hr/> 6 Contributor address; City; State; Zip Code 8716 Bellancia Drive Austin, TX 78738	7 Amount of Contribution (\$) \$52.95
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Law Finance Group

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 19/40

2 FILER NAME
Mobility for All

3 Filer ID (Ethics Commission Filers)
00090488

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

10/02/2020

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)
AECOM
7 Pledgor Address; City; State; Zip Code
9400 Amberglen Blvd
#E
Austin, TX 78729

8 Amount of
pledge (\$)
\$100,000.00

9 In-kind description
(If applicable)

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

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

5 Date

10/14/2020

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)
Atlassian
7 Pledgor Address; City; State; Zip Code
303 Colorado Street
suite 1600
Austin, TX 78701

8 Amount of
pledge (\$)
\$50,000.00

9 In-kind description
(If applicable)

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

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

5 Date

10/16/2020

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)
HDR Engineering Inc
7 Pledgor Address; City; State; Zip Code
504 Lavaca Street
Suite 900
Austin, TX 78701

8 Amount of
pledge (\$)
\$30,000.00

9 In-kind description
(If applicable)

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

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/6 Rpt: 20/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/08/2020	5 Corporation / Labor Organization name Amalgamated Transit Union <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code 10000 New Hampshire Ave Silver Spring, MD 20903-1706	7 Amount of contribution (\$) \$5,000.00
Date 10/21/2020	Corporation / Labor Organization name Aquirre & Fields LP PAC <hr/> Corporation / Labor Organization address; City; State; Zip Code 12708 Riata Vista Circle Suite A-109 Austin, TX 78727	Amount of contribution (\$) \$1,000.00
Date 10/19/2020	Corporation / Labor Organization name Ascension <hr/> Corporation / Labor Organization address; City; State; Zip Code 4040 Vincennes Circle Indianapolis, IN 46268	Amount of contribution (\$) \$10,000.00
Date 10/07/2020	Corporation / Labor Organization name Bartlett Cocke General Contractors <hr/> Corporation / Labor Organization address; City; State; Zip Code 7901 E Riverside Dr #100 Austin, TX 78744	Amount of contribution (\$) \$2,000.00
Date 10/14/2020	Corporation / Labor Organization name Benchmark Land Development, Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code 610 W 5th Street Suite 601 Austin, TX 78701	Amount of contribution (\$) \$5,000.00
Date 10/07/2020	Corporation / Labor Organization name Brookfield Residenntial <hr/> Corporation / Labor Organization address; City; State; Zip Code 11501 Alterra Parkway #100 Austin, TX 78758	Amount of contribution (\$) \$15,000.00
Date 10/21/2020	Corporation / Labor Organization name Buie & Co LLC <hr/> Corporation / Labor Organization address; City; State; Zip Code 2815 Exposition Blvd Suite 200 Austin, TX 78703	Amount of contribution (\$) \$10,000.00

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 2/6 Rpt: 21/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/09/2020	5 Corporation / Labor Organization name Cobb, Fendley & Associates, Inc. <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code 505 East Huntland Ave Austin, TX 78752	7 Amount of contribution (\$) \$5,000.00
Date 10/08/2020	Corporation / Labor Organization name DPR Construction <hr/> Corporation / Labor Organization address; City; State; Zip Code 310 Comal Street Building A, Suite 30 Austin, TX 78702	Amount of contribution (\$) \$5,000.00
Date 10/17/2020	Corporation / Labor Organization name Foley & Lardner LLP <hr/> Corporation / Labor Organization address; City; State; Zip Code 777 E Wisconsin Ave Milwaukee, WI 53202	Amount of contribution (\$) \$2,500.00
Date 10/21/2020	Corporation / Labor Organization name GCRE/TX Austin Master LLC <hr/> Corporation / Labor Organization address; City; State; Zip Code 24855 Del Prado Dana Point, CA 92629	Amount of contribution (\$) \$10,000.00
Date 10/01/2020	Corporation / Labor Organization name Hill Country Conservancy <hr/> Corporation / Labor Organization address; City; State; Zip Code PO Box 163125 Austin, TX 78716	Amount of contribution (\$) \$750.00
Date 10/24/2020	Corporation / Labor Organization name Int'l Brotherhood of Electrical Workers PAC <hr/> Corporation / Labor Organization address; City; State; Zip Code 900 Seventh St NW Washington, DC 20001	Amount of contribution (\$) \$3,000.00
Date 10/01/2020	Corporation / Labor Organization name K&L Gates LLP <hr/> Corporation / Labor Organization address; City; State; Zip Code K&L Gates Center 210 Sixth Avenue Pittsburgh, PA 15222	Amount of contribution (\$) \$10,000.00

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 3/6 Rpt: 22/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/01/2020	5 Corporation / Labor Organization name Kimley Horn <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code 421 Fayetteville Street Suite 600 Raleigh, NC 27601	7 Amount of contribution (\$) \$2,500.00
Date 10/15/2020	Corporation / Labor Organization name Laborers' Local 1095 <hr/> Corporation / Labor Organization address; City; State; Zip Code 5555 N Lamar Blvd Suite E121 Austin, TX 78751	Amount of contribution (\$) \$5,000.00
Date 10/20/2020	Corporation / Labor Organization name Liberal Austin Democrats <hr/> Corporation / Labor Organization address; City; State; Zip Code P.O. Box 49712 Austin, TX 78765-9712	Amount of contribution (\$) \$200.00
Date 10/22/2020	Corporation / Labor Organization name Live Oak - Gottesmann LLC, DBA Live Oak <hr/> Corporation / Labor Organization address; City; State; Zip Code 2705 Bee Caves Road Suite 230 Austin, TX 78746	Amount of contribution (\$) \$10,000.00
Date 10/13/2020	Corporation / Labor Organization name MH HCAustin, LLC <hr/> Corporation / Labor Organization address; City; State; Zip Code 2725 Rocky Mountain Avenue Suite 200 Loveland, CO 80538	Amount of contribution (\$) \$10,000.00
Date 10/01/2020	Corporation / Labor Organization name MV Transportation, Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code PO Box 479 Elk Horn, IA 51531	Amount of contribution (\$) \$35,000.00
Date 10/16/2020	Corporation / Labor Organization name Manifold Real Estate <hr/> Corporation / Labor Organization address; City; State; Zip Code P.O. Box 200463 Austin, TX 78720	Amount of contribution (\$) \$10,000.00

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 4/6 Rpt: 23/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/10/2020	5 Corporation / Labor Organization name Maxwell Locke and Ritter LLP <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code 401 Congress Ave Suite 1100 Austin, TX 78701	7 Amount of contribution (\$) \$2,500.00
Date 10/13/2020	Corporation / Labor Organization name McWhinney Real Estate Services, Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code 2725 Rocky Mountain Avenue Suite 200 Loveland, CO 80538	Amount of contribution (\$) \$5,000.00
Date 10/19/2020	Corporation / Labor Organization name Noarthline Leander Development Co LLC <hr/> Corporation / Labor Organization address; City; State; Zip Code c/o Personal Administrators, Inc. Suite C-100 Austin, TX 78746	Amount of contribution (\$) \$2,500.00
Date 10/01/2020	Corporation / Labor Organization name Parsons Corporation PAC <hr/> Corporation / Labor Organization address; City; State; Zip Code 100 W Walnut Street Pasadena, CA 91124	Amount of contribution (\$) \$10,000.00
Date 09/28/2020	Corporation / Labor Organization name Raba Kistner <hr/> Corporation / Labor Organization address; City; State; Zip Code 12821 West Golden Lane San Antonio, TX 78249	Amount of contribution (\$) \$2,500.00
Date 10/09/2020	Corporation / Labor Organization name Red Line Parkway Initiative <hr/> Corporation / Labor Organization address; City; State; Zip Code 4016 Maplewood Ave Austin, TX 78722-1518	Amount of contribution (\$) \$100.00
Date 10/15/2020	Corporation / Labor Organization name Redleaf Partners LLC <hr/> Corporation / Labor Organization address; City; State; Zip Code 4015 Guadalupe St Austin, TX 78751	Amount of contribution (\$) \$5,000.00

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 5/6 Rpt: 24/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/22/2020	5 Corporation / Labor Organization name Riverside Resources Property Management <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code 100 Congress Ave Suite 1450 Austin, TX 78701	7 Amount of contribution (\$) \$10,000.00
Date 10/17/2020	Corporation / Labor Organization name Robinson Family Management <hr/> Corporation / Labor Organization address; City; State; Zip Code P.O. Box 9556 Austin, TX 78766	Amount of contribution (\$) \$10,000.00
Date 10/01/2020	Corporation / Labor Organization name STG Design, Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code 828 W. 6th Street Suite 300 Austin, TX 78703	Amount of contribution (\$) \$5,000.00
Date 10/20/2020	Corporation / Labor Organization name Southwest Laborers District Council <hr/> Corporation / Labor Organization address; City; State; Zip Code 11720 East 21st Street Suite D Tulsa, OK 74129	Amount of contribution (\$) \$5,000.00
Date 10/13/2020	Corporation / Labor Organization name Studio 8 Architects, Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code 611 W 15th Street Austin, TX 78701	Amount of contribution (\$) \$5,000.00
Date 10/19/2020	Corporation / Labor Organization name Texas Gas Service <hr/> Corporation / Labor Organization address; City; State; Zip Code 1301 S Mopac Expy Suite 400 Austin, TX 78746	Amount of contribution (\$) \$5,000.00
Date 10/04/2020	Corporation / Labor Organization name Texas Working Families PAC <hr/> Corporation / Labor Organization address; City; State; Zip Code 2850 Massachusetts Ave Metairie, LA 70003	Amount of contribution (\$) \$2,500.00

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 6/6 Rpt: 25/40
2 FILER NAME Mobility for All		3 Filer ID (Ethics Commission Filers) 00090488
4 Date 09/25/2020	5 Corporation / Labor Organization name UA Plumbers & Pipefitters Local 286 PAC Fund	7 Amount of contribution (\$) \$5,000.00
	6 Corporation / Labor Organization address; City; State; Zip Code 814 Airport Blvd Austin, TX 78702	
Date 10/21/2020	Corporation / Labor Organization name Vinson & Elkins Texas Political Action Committee	Amount of contribution (\$) \$2,500.00
	Corporation / Labor Organization address; City; State; Zip Code 2300 First City Tower Houston, TX 77002-6760	
Date 10/12/2020	Corporation / Labor Organization name WSP USA Inc.	Amount of contribution (\$) \$25,000.00
	Corporation / Labor Organization address; City; State; Zip Code One Penn Plaza New York City, NY 10119	
Date 10/08/2020	Corporation / Labor Organization name Winstead PC	Amount of contribution (\$) \$2,500.00
	Corporation / Labor Organization address; City; State; Zip Code 2728 N. Harwood Street Suite 500 Dallas, TX 75201	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/15 Rpt: 26/40	2 FILER NAME Mobility for All	3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/09/2020	5 Payee name Adisa Communications	
6 Amount (\$) \$13,500.00	7 Payee address; City; State; Zip Code 1706 Overhill Drive, A Austin, TX 78721	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Outreach
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/09/2020	Payee name Adisa Communications	
Amount (\$) \$9,302.20	Payee address; City; State; Zip Code 1706 Overhill Drive, A Austin, TX 78721	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Media Buy
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/14/2020	Payee name Austin Area Urban League	
Amount (\$) \$8,000.00	Payee address; City; State; Zip Code 8011 Cameron Road Suite A-100 Austin, TX 78754	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Outreach
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/15 Rpt: 27/40	2 FILER NAME Mobility for All	3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/22/2020	5 Payee name Austin Coalition for Transit PAC	
6 Amount (\$) \$3,500.00	7 Payee address; City; State; Zip Code P.O. Box 49166 Austin, TX 78765	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Outreach Efforts
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/23/2020	Payee name Butts, David	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 1914 Patton Ln Austin, TX 78723-1236	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Strategy
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2020	Payee name CheckMark Typesetting	
Amount (\$) \$1,860.23	Payee address; City; State; Zip Code 3217 N. IH 35 Austin, TX 78722	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/15 Rpt: 28/40	2 FILER NAME Mobility for All	3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/08/2020	5 Payee name Clarity Campaign Labs LLC	
6 Amount (\$) \$58,000.00	7 Payee address; City; State; Zip Code 729 15th St NW Suite 700 Washington, DC 20005-6037	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/14/2020	Candidate/Officeholder name Office sought Office held	
Payee name DSPolitical, LLC		
Amount (\$) \$50,000.00	Payee address; City; State; Zip Code 1250 H Street NW Suite 200 Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Media Buy
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/30/2020	Candidate/Officeholder name Office sought Office held	
Payee name Frost Bank		
Amount (\$) \$5.00	Payee address; City; State; Zip Code 401 Congress Ave Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly bank fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/15 Rpt: 29/40	2 FILER NAME Mobility for All	3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/16/2020	5 Payee name Frost Bank	
6 Amount (\$) \$12.00	7 Payee address; City; State; Zip Code 401 Congress Ave Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/16/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$12.00	Payee name Frost Bank Payee address; City; State; Zip Code 401 Congress Ave Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/09/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$6,195.00	Payee name Goss, Delwin Payee address; City; State; Zip Code 6410 Ponca Street Austin, TX 78741	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Placement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/15 Rpt: 30/40	2 FILER NAME Mobility for All	3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/23/2020	5 Payee name Kruemcke, Max	
6 Amount (\$) \$7,900.00	7 Payee address; City; State; Zip Code 510 Tx Hwy 304 Bastrop, TX 78602	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Production
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2020	Payee name Laura Hernandez Consulting LLC	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 6000 Lonesome Valley Trail Austin, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2020	Payee name Littlefield Consulting	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code P.O. Box 90591 Austin, TX 78709	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense September Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/15 Rpt: 31/40	2 FILER NAME Mobility for All	3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/23/2020	5 Payee name Margorie, Becker	
6 Amount (\$) \$37,000.00	7 Payee address; City; State; Zip Code 1205 Kinney Ave Unit A Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TV Ad Production
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2020	Payee name Pritchard, Caleb	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1212 Guadalupe St #210 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Organizing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2020	Payee name Pritchard, Caleb	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 1212 Guadalupe St #210 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Organizing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/15 Rpt: 32/40	2 FILER NAME Mobility for All	3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/24/2020	5 Payee name Stripe, Inc.	
6 Amount (\$) \$1,954.35	7 Payee address; City; State; Zip Code 185 Berry St Suite 550 San Francisco, TX 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/20/2020	Payee name Texas Vote Environment	
Amount (\$) \$4,450.91	Payee address; City; State; Zip Code 817 Brazos Street Suite 600 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing literature
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/22/2020	Payee name Texas Vote Environment	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 817 Brazos Street Suite 600 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Outreach
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/15 Rpt: 33/40	2 FILER NAME Mobility for All	3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/08/2020	5 Payee name Wick, Jim	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 10551 Bilbrook Place Austinn, TX 78748	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense September services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2020	Payee name Y Strategy LLC	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Management
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2020	Payee name Y Strategy LLC	
Amount (\$) \$3,090.00	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad placement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/15 Rpt: 34/40	2 FILER NAME Mobility for All	3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/06/2020	5 Payee name Y Strategy LLC	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad Graphic Design
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2020	Payee name Y Strategy LLC	
Amount (\$) \$54,035.00	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2020	Payee name Y Strategy LLC	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Management
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/15 Rpt: 35/40	2 FILER NAME Mobility for All	3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/06/2020	5 Payee name Y Strategy LLC	
6 Amount (\$) \$1,650.00	7 Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signage Placement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2020	Payee name Y Strategy LLC	
Amount (\$) \$20,927.58	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mail Production
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2020	Payee name Y Strategy LLC	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Literature
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/15 Rpt: 36/40	2 FILER NAME Mobility for All	3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/07/2020	5 Payee name Y Strategy LLC	
6 Amount (\$) \$311,120.00	7 Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense media purchase
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/07/2020	Payee name Y Strategy LLC	
Amount (\$) \$48,703.52	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mail
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/14/2020	Payee name Y Strategy LLC	
Amount (\$) \$40,600.44	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mail Production
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/15 Rpt: 37/40	2 FILER NAME Mobility for All	3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/14/2020	5 Payee name Y Strategy LLC	
6 Amount (\$) \$667.00	7 Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Placement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/14/2020	Payee name Y Strategy LLC	
Amount (\$) \$30,899.00	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/14/2020	Payee name Y Strategy LLC	
Amount (\$) \$350.00	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/15 Rpt: 38/40	2 FILER NAME Mobility for All	3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/14/2020	5 Payee name Y Strategy LLC	
6 Amount (\$) \$2,745.00	7 Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online advertisement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/14/2020	Payee name Y Strategy LLC	
Amount (\$) \$2,992.00	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Literature distribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2020	Payee name Y Strategy LLC	
Amount (\$) \$43,460.00	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mail Production
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/15 Rpt: 39/40	2 FILER NAME Mobility for All	3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/15/2020	5 Payee name Y Strategy LLC	
6 Amount (\$) \$29,406.25	7 Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Advertising
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/22/2020	Candidate/Officeholder name Office sought Office held	
Payee name Y Strategy LLC		
Amount (\$) \$88,686.26	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mail Production
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/22/2020	Candidate/Officeholder name Office sought Office held	
Payee name Y Strategy LLC		
Amount (\$) \$46,918.84	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/15 Rpt: 40/40	2 FILER NAME Mobility for All	3 Filer ID (Ethics Commission Filers) 00090488
4 Date 10/22/2020	5 Payee name Y Strategy LLC	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/22/2020	Payee name Y Strategy LLC	
Amount (\$) \$1,545.00	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print Advertisement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/22/2020	Payee name Y Strategy LLC	
Amount (\$) \$2,706.25	Payee address; City; State; Zip Code 3110 Manor Rd Suite H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense literature
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held